1-1-1972

The immediate effects of three instructional means in assisting prospective teachers to arrive at an empathic state.

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THE IMMEDIATE EFFECTS OF THREE INSTRUCTIONAL MEANS IN ASSISTING PROSPECTIVE TEACHERS TO ARRIVE AT AN EMPATHIC STATE

A Dissertation Presented

By

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Submitted to the Graduate School of the

University of Massachusetts in

partial fulfillment of the requirements for the degree of

DOCTOR OF EDUCATION

August, 1972

Major Subject: Education

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August, 1972

ABSTRACT

THE IMMEDIATE EFFECTS OF THREE INSTRUCTIONAL MEANS
IN ASSISTING PROSPECTIVE TEACHERS
TO ARRIVE AT AN EMPATHIC STATE

A Dissertation By

LOLA WASHBURN

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This study was designed to test the immediate effect of instructing prospective teachers in arriving at an empathic state of being through inspiration and beauty as experienced via a tape-slide presentation. The presentation included photos of the beauty of the world's landscape and animal life, and reflected the oneness of mankind through the many faces from all parts of the world. Also of interest to this researcher was the immediate effect of a didactic approach of teaching people how to arrive at a state of empathic understanding as compared to an inspirational approach. The combined effect, aesthetic and didactic, was also tested as an approach to arriving at an empathic state of being.

Sixty female students between the ages of 18 and 23, unmarried and in an Early Childhood Program in the School of Home Economics at the University of Massachusetts, were the subjects for this present study. The subjects were randomly assigned to four treatment groups of 15 each. The experimental group, the aesthetic-religious group, received the tape-slide presentation. The didactic-content group listened to a tape-recorded lecture on the empathic process and on how to arrive an an empathic state of being. The combined condition was composed of the

instructional procedures from the two other conditions.

The Empathic Process Scale for Verbal Behavior was designed for this study to measure the level of empathic response made by each subject. The subjects responded in writing to a critical incident viewed on an eight-millimeter film. Three trained judges rated each response with reference to The Empathic Process Scale for Verbal Behavior, a scale of six levels. An inter-judge reliability of r = .81 was accepted as a reliable coefficient of inter-judge consistency.

A simple one-way analysis of variance procedure showed a significant treatment effect at the .10 level of significance. A comparison of treatment means, a t-test, between the aesthetic-religious and didactic-content conditions was significant in a negative direction at .05. A t-test between the didactic-content and combined conditions showed no significant results. A Duncan Multiple Range Test of differences between all possible pairs of means resulted in no significant differences existing.

The results indicated that the didactic-content instructional approach was the most effective in assisting people at arriving at an empathic state of being.

The main effect was significant only at .10, indicating that the above-mentioned results must be interpreted cautiously. The study was unique in that empathy was defined as a process and all responses were rated as a response level of that process. The rating scale designed for the purposes of this study plus the uniqueness of the study were the basic reasons why this researcher accepted significance at .10,

looking for the slightest effect in manipulating the levels of empathic responding.

ACKNOWLEDGMENTS

Much of my joy in having completed this dissertation is heightened by my sense of gratitude to all those who have been so near to my agony and ecstasy during the many months I have labored to the finish.

To my daughters, Yvonne and Valerie, I am immeasurably grateful for their eternal empathic understanding.

From Dr. Daniel C. Jordan I have received a multitude of opportunities to develop "competence" for the purpose of serving others. I am grateful to Dr. Jordan for affording me these opportunities and for supporting me in every adventure I have undertaken under his most competent guidance. I am most indebted to Dr. Linda Blane for her continuous and overflowing concern and support, and for her intellectual and professional integrity which proved to be always in my best interest. I am grateful to Dr. Norma Jean Anderson for her steadfast support of my programs and projects, especially during her many taxing and trying administrative responsibilities. I am most thankful to Dr. Jim Fortune who most graciously read Chapters III, IV and V, giving me the benefit of his research expertise during the analysis of my data.

It is not often that one is blessed with the help of co-workers in the writing of a dissertation. I was one so fortunate. My research efforts were strengthened by Stephen Waite's generous gift of allowing me to use his slide-tape presentation which he so well designed and coordinated to inspire any viewer.

People who accept you at your worst, even when they may not

understand what you are going through, have surrounded me during this past year. Because of my very deep appreciation and affection for them I want to acknowledge them by name, as their presence in my life was always a validation that empathic understanding exists far beyond the parameters of this dissertation. These very special people are: the entire ANISA staff; Juan and Braulia Caban; Florence and Bill Conway; Mabel Garis; James Haslip; Laura Masson; Virginia Mondschein; Emmanuel Ofem; Mark and Maxine Rossman; Nat and Carol Rutstein; and Ray Shephard.

I am also very much indebted to my raters: Bette Ames, Dominga Batista, Wally Carter, Cathy Stanley, Joe Saphier, and Stephen Boal were most helpful to me, assisting me in collecting my data. I am most grateful to them for their help.

To Gay Flannelly I am very grateful for undertaking the very tedious task of typing this dissertation during the "wee hours" of the morning. Gay's never ending kindness during stress always refreshed our moments of working together.

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CHAPTER I

INTRODUCTION

Carl Rogers and Rollo May have identified empathy as a key process in effecting change in the counseling relationship (Rogers, 1951; May, 1967). Rogers has observed that it is through an empathic identification with the client that the counselor is able to assist the client in understanding his own feelings (1951, p. 29).

In his book, The Art of Counseling (May, 1967), Rollo May devotes a chapter to defining and clarifying the empathic process in the counseling setting. Empathy combined with love is the essential combination for successful personal relations. Rogers also believes that it is through such a relationship that a client can learn how to relate to others in a group. The group leader, relating to a group member, can show others in the group how to relate to the feelings of another. An empathic involvement of each group member results in changes within him as he begins to internalize the behavior patterns of the group leader. The empathic involvement of the counselor in any counseling relationship is the counseling approach recommended by both May and Rogers. Empathic involvement provides the optimum emotional environment for emotional learning. Blackman (1958) and others working with schizophrenic patients also have observed the key role that empathic responses play in helping the patient to open himself to other people. Thus, there is evidence in the clinical setting which underscores the importance of empathy in learning.

There is reason then to consider the empathic quality a necessary characteristic of the classroom teacher. Rollo May believes the empathic involvement of the teacher facilitates learning in the classroom as it does in the clinical setting. He states:

> "Significant teaching requires empathy, for only then does the professor's mind meet the student's in a fructifying intellectual experience. The teacher without empathy is like a motor car with the gears unmeshed--the motor races, making noise as ineffectual as 'sounding brass and a clanging cymbal.' Knowledge may go from mind to mind through relatively impersonal means; but we should all admit the more significant kind of knowledge is that in which there is a mutual participation, a partial identification of the minds of teacher and student. Then truth is made a living force passed from one to another, and education becomes truly a 'leading out' of the highest creative potentialities of the student's mind through inspiring contact and participation in the creative actualities of the teacher's mind" (1967, p. 123).

If empathy is so fundamental a process in the "'leading out' of the highest creative potentialities of the mind," every teacher ought to be able to empathize and to understand the nature of the process in the developing child. A process so fundamental to releasing human potential must be understood by every truly educated person if he is always to maximize his competence to learn from every life experience. This latter is no longer a choice but a necessity for living in our age--an age that Alvin Toffler (1971) calls the "super industrial revolution." The products and changes are occurring so rapidly during this time that the multiple stimulation "overloads the human organism's physical adaptive systems and its decision-making processes" (Toffler, p. 326). Learning competence is required for everyone to at least cope with present living, to say nothing of developing toward self-actualization.

Critical to learning competence is a knowledge of and control over

one's emotions. A competent learner, in fact, is one who has well-ordered his feelings into emotional habits which facilitate his combined abilities to abstract meaning from every situation encountered in his life. To become more fit and able as a learner, one needs then an emotional climate which allows one maximum opportunity to learn how to identify and order one's emotions.

Maximizing the child's capacity to gain the most from any learning opportunity is initially the responsibility of the teacher to the student. If a teacher's responses given with empathic understanding facilitate learning in the classroom, the student's opportunities to learn are increased. The challenge then of every teacher is to learn and internalize the steps in the empathic process so as to be fitted to respond appropriately to every student. As the research literature in therapy clearly indicates, this learning at an adult stage can be very difficult (May, 1967; Rogers, 1942, 1951). Be that as it may, one must begin if change is to be realized.

An examination of the definitions of empathy makes an appropriate beginning.

The Empathic Process

Historically and theoretically empathy has been conceptualized from many perspectives. Some writers view empathy as a biological endowment. Robert Katz (1963, p. 97) reports that:

> "Those disciplines dealing with the instinctual endowment of man would tend to think of empathy as a primitive (archaic) skill (something we are born with, an imaginative or intuitive

> gift which is part of human nature) capable of being atrophied by the process of culture."

Here man is viewed as having an "endowment of impulses" which are similar or common to all men. The influence of cultural learning has a reverse effect on this innate "endowment of impulses."

Psychoanalytic theorists view man as developing through biological and cultural influences and describe the material nature of man. Henry Stack Sullivan in Cooper (1970) states that empathy is a ". . . peculiar linkage expressing an archaic primary relationship between the mother and neonate; the process is one by means of which the tension of anxiety, when present in the mothering one, induces anxiety in the infant" (1970, p. 170). Another psychoanalytic theorist, Schafer (1957), views empathy as "a basic emotional response of the infant to another person" (Cooper, p. 170). He goes on to say that empathy is ". . . the inner experience of sharing in and comprehending the momentary psychological state of another person" (Cooper, p. 171). The processes of introjection, identification or imitation are often interchangeably used by psychoanalytic writers to describe the partly instinctual and partly cultural components of empathy. Psychoanalysts also explain the empathic process in terms of the permeability of ego-states, that is, a shifting of self between a conscious and unconscious state, which implies being able to abandon the confines of one's own frame of reference. Freud states that it is through the processes of introjection and imitation that "one ego becomes like another one, which results in the first ego behaving itself in certain respects in the same way as the second; it imitates it, and as it were makes it into itself" (Katz, pp. 71-72).

The psychoanalytic description of the empathic process does not suggest developmental phases.

In the writings of George H. Mead, the empathic skill is acknowledged as developmental through cultural influences. Social and interpersonal experiences provide the means by which empathic skill develops. George Mead stresses the social and interpersonal aspects of communication by stating that empathy is a skill dealing with verbal symbols and cues acquired in interaction with others and is primarily a function of experience largely internal and employing rational skills of imagination and the intellect. Mead includes role-taking as part of the empathic process, which he says ". . . involves thinking and feeling as one believes the other person thinks and feels--a form of empathy or what might be called synconation" (Katz, p. 77).

Similar to social psychologist Mead, Jacob L. Moreno (1952) also views empathy as a social skill developed through role-playing. Moreno regards empathy as an "as-if" activity of the imagination which assumes that spontaneous impulses, one's identity or being, can be induced into the being of another through social interaction and is identified as role-playing.

Frijda (Berkowitz, 1969) defines empathy in a cognitive context. He classifies empathy in a category of "meaning responses" the development of which is influenced by verbal learning. He states:

> "Empathy, in its different guises, should be considered a form of meaning response, a way of coding behavioral meaning rather than being the source of its emergence. Empathy and verbal learning have to be considered as two possible meaning responses among several . . . the meaning of expressive behavior may refer to an emotional experience or attitude in

> the observed person. The observer may produce an inner imaginary representation of the other person's feeling; or he may instead evoke a verbal label or put one in readiness; or the inner empathetic representation may be replaced by incipient or actual motor imitation of the perceived movements" (Berkowitz, p. 170).

Others who define empathy as a cognitive skill are Otto Fenichel (1945) and Theodore Reik (1949). Fenichel defines empathy in two parts: an identification with the other person; and an awareness of one's feelings after the identification, a way of knowing the other person's feelings (Katz, p. 39). Reik proposes a four-phase definition of the empathic process as follows: (1) Identification; (2) Incorporation; (3) Reverberation; (4) Detachment (Katz, pp. 41-47). The third step in the Reik proposal is a subjective experience of the feelings of the other person and of oneself. The self feelings in this case are those which one is presently feeling and those from past experiences evoked through the experience. The fourth stage is the objective analysis of the experience in which there is a withdrawal from the subjective aspects of the experience.

The Gestalt psychologists, on the other hand, define empathy in perceptual terms which for the most part call for no involvement of the thought process. Meaning is received directly from the external world through the senses and is not derived through a thought process such as analogy or inference. The one who is empathizing experiences intuitively another person. The intuition is global and undifferentiated. Kohler views emotional experiences as sensory facts (Cooper, p. 172). It is through perceptions of physical behavior that direct contact with and knowledge of others' mental processes or emotional states are made.

Experimental psychologist Ezra Stotland defines empathy as the "sharing of another's emotions" or "it is an observer's reacting emotionally because he perceives that another is experiencing or is about to experience an emotion." He goes on to say an emotion is a "physiological state of arousal which has subjective affective concomitants." Neither the physiological state nor the subjective state in and by itself is sufficient to define emotion (Berkowitz, p. 272).

Carl Rogers, a clinical psychologist, states: "The ability to empathize may be another way of saying that one person is capable of taking the role of the other, an essential aspect of all interpersonal communication" (1951, p. 348).

Emotions, empathy being one, are thought by some to be developmental in nature (Plutchik, 1962). William Turner (Plutchik, p. 61) introduces a concept of primary emotions which he believes to be evidenced throughout the entire evolutionary scale. Implicit in Turner's view is that emotions "are adaptive devices" in the struggle for the individual to survive at all evolutionary levels. These primary emotions are expressed in relation to a basic adaptive biological process, of which eight basic behavior patterns "represent the prototype of all emotional behavior" (Plutchik, p. 61). A prototypical behavior pattern from which empathy would logically emerge is termed incorporation. "Incorporation is the act of taking in or ingesting food and represents a basic prototypic pattern of behavior indicating acceptance of stimuli . . ." from the external world (Plutchik, p. 61). All authors seem to agree that somewhere in the empathic process there is a "taking in" of an object

or the internal framework of another individual. Turner's theory of an incorporative act as basic to the "taking in" aspect of development suggests the origins of empathy. The notion of incorporation is also supported by Erikson (1970). His theory stipulates that incorporation is dependent upon the baby's willingness and ability "to suck on appropriate objects and to swallow whatever appropriate fluids they emit . . ." and further to "take in" with the eyes the visual field and so on in an upward biological developmental direction (Erikson, p. 66). Thus, Erikson also views emotional development coinciding with biological development. His reference to "willingness" on the part of the baby to "take in" is an evident and key factor in the empathic process as suggested by Blackman's research with schizophrenic patients (Blackman, 1958).

Cooper (1970) also suggests the developmental nature of empathy and states that the neonate responds empathically at a much lower level than the child, who has "greater capacity for understanding a broader range of experiences than a neonate and the ability for greater communication of his understanding" (Cooper, p. 172).

With reference to early emotional development, Sullivan views empathy as a "peculiar emotional linkage that subtends the relationship of the infant with other significant people" (1953, p. 17). He believes empathy to be of greatest importance between six months to twenty-seven months of age and views it as an ". . . emotional contagion or communion" (1953, p. 17). While Sullivan regards empathy as an important part of interpersonal communication, his writings do not suggest empathy as developmental. Thus, there are some writers who do not address the devel-

opmental nature or process-sequence notion of empathy as stated earlier.

Another such writer who shares Sullivan's view is Schafer (1959), a psychoanalytic spokesman. He views empathy as an important emotional component in interpersonal communication, but like Sullivan does not illustrate concern in his writings about the developmental nature of empathy.

Thus, in the writings of these writers there is no clear statement as to the origin of empathy. In fact, there is even disagreement as to whether the origin of empathy is an issue of concern. For those who define empathy as a developmental process, characteristics of the empathic process begin to emerge in their descriptions. These characteristics are evident in the description of the empathic process described by Rogers for adult behavior (Rogers, 1951).

However, the many definitions of empathy share some things in common. What appears to be a first step in the empathic process is the willingness to go beyond the self (Katz, 1963). This willingness to go beyond the self is expressed in a reaching out to "take in" the being of another person or object. Blackman (1958), working with schizophrenic patients, noted that they often will not allow another to know their feelings or concerns. Without this initial willingness on the part of the patient, no benefit can be gained from the counseling situation. What does this say to the teacher? It suggests that the teacher must have a willingness to allow a child to move into his being, so to speak, to experience his feelings as they honestly are. Without this initial willingness on the part of the teacher, it is reasonable to question

whether that teacher will be at all able to understand how a child feels about what he is doing and what he is learning. This initial willingness on the part of the teacher to expose his feelings honestly then allows the child to do so also. This does not mean that the expression of those feelings can be inappropriately and indiscriminately expressed. By all means, sensitive control in expressing feelings is required. An honest expression such as "I am furious, John, that the plant was spilled in the fish tank, now let's clean it out," tells the child how the teacher honestly feels and at the same time gives him a knowledge of the emotional climate of the classroom at that specific time. Such a statement also provides John with a direction as to what one does when one is angry. The consideration the teacher gives John in relation to his responsibility to make right a mistake teaches him that out of "failure" he can learn. In addition, the teacher's freedom to express feelings honestly provides a model for John to learn how to express his own feelings honestly and in a way conducive to his becoming competent. Thus, this initial willingness to allow another person to know one's feelings is necessary for achieving a state of empathic understanding.

There are additional steps in the empathic process. Carl Rogers describes the empathic process in a systematic way. The most therapeutic relationship occurs when the counselor assumes:

> ". . . the internal frame of reference of the client, to perceive the world as the client himself as he is seen by himself, to lay aside all perceptions from the external frame of reference while doing so, and to communicate something of this empathic understanding to the client" (Rogers, p. 29).

Rogers' description of the empathic process has four steps. He

labels each by identifying the defining characteristics which clarify and assist the reader in understanding the necessary components of empathizing with another. Rogers deliberately clarifies what he means by empathy as he has observed that some inexperienced clinicians assume another attitude towards their clients which results in their responding to the client in a directive way rather than with empathic understanding. This subtle difference between responding with empathy as opposed to being direct is critical in determining whether the counselor facilitates the client's learning or, in fact, prevents it. This observation has implications for the responses teachers give children in a learning relationship. The important component Rogers identifies in the response emerging from an empathic attitude is an "as if" feeling that one is in another's pair of shoes. Rogers says that if this quality is not present in the counselor's response to his client, the client will be unable to express his feelings, a critical variable on which his ability to learn about himself is based.

Rogers' description of the empathic process identifies processes within empathy with which every classroom teacher is familiar. Identification has been included in many definitions of empathy. Rogers suggests that the identification process involves perceiving the world as the client does. David Stewart (1956) and Henry Smith (1966) believe that imitation occurs in the identification process. While this is not definitely "sorted out" in terms of the relationship between identification and imitation, teachers benefit from awareness that imitating and identifying occur in the empathic process.

Transference is also suggested in Rogers' description of the empathic process. Assuming the "internal frame of reference" of another helps to create the "bond of affection" that Freud called transference in the client-counselor relationship (Stewart, 1956). Freud viewed transference as part of the identifying process between the counselor and client.

Basic to transference is good will. Good will is the "conscious form of that which unconsciously and spontaneously is the very ground of the transference process" (Stewart, p. 25). Without good will, Stewart says a "wall comes up and mutual acquaintance is delayed" (Stewart, p. 25).

What also appears to be involved in the empathic process is what educators and psychologists call role-playing: to assume the "internal frame of reference" of another person and to perceive the situation as that other person sees it and feels it, as the child who pretends to be mommy. Through role-playing an understanding is internalized as to what it is like to be the other person. Role-playing appears to set the stage for assuming the "as if" quality involved in empathic understanding.

A distinction needs to be made between assuming an empathic quality and projecting one's own feelings on another person. Hastorf and Bender (1952) define the distinction in the following way:

> "Projection is more autistic and personal than empathy in that the projector attributes his own feelings to his associates. Empathic ability seems more objective, more cognitive, and more truly perceptive of the psychological structure of the other person" (1952, p. 576).

To respond to another person on the basis of what one thinks another person is feeling rather than on an understanding of what he is feeling will result in preventing him from being able to freely express himself. Suggested throughout Rogers' client-centered therapy literature is a technique to prevent this from occurring. Basically what is involved is for the teacher, for example, to repeat what the child says before responding to the content of his conversation and not one's judgments about what he is saying. This technique assists the teacher in the same way as role-playing assists the child to understand what it is like to feel another person's ideas and reactions. To do this allows the child the benefit of receiving from the teacher his understanding as well as the knowledge that his years of experience have brought him. Because the teacher assumes an empathic understanding of the child, he moves into the child's frame of reference and responds to that frame of reference as if it were his own ideas, feelings, and concerns. In a very practical setting, verbally repeating all of what a child says would be impossible. But what would be realistic and assist the teacher in accomplishing the same end would be a conscious repeating of the child's words and an overt repetition when there appears to be a lack of understanding in communication. Of importance is to let the child know that in some way he is understood and that his ideas and concerns make a difference to the teacher. The teacher is always in the position of being a responder to the learner, to let him know whether he is organizing knowledge accurately. Frequently, the child provides the teacher with insight into new ways of organizing information which is

of sound logical basis and different from the teacher's. In any event, to learn competently the child and the teacher must participate in the process which involves accurate perceptions of the way each other is thinking, feeling, and acting, rather than an assumed guess about these qualities.

Another distinction needs to be made between empathy and another process, sympathy. Bucheimer (1953) defines this distinction in the following way:

> "A sympathetic person feels along with another person but not necessarily into a person. A sympathetic person does not need to interact with another person. To feel along with him, he may understand the other person, but does not need to communicate the understanding to the other person. Empathic behavior implies a convergence of behavior. Sympathetic behavior implies a parallelism in the behavior of the two individuals" (Bucheimer, p. 63).

Both empathy and sympathy involve becoming involved with another person. The purpose is different for each. In empathy the focus of attention is on the feelings and situations of the other person. Sympathy, on the other hand, is characterized by the assumed duality of the parallel between one's own feelings and the feelings of others. In sympathy, there is less concern with objective reality and the character of the other person's situation, as if one is looking at the other person along parallel lines with himself.

Concerning the differences between empathy and sympathy, Katz reports the following:

> ". . . when we sympathize we are aware of our own state of mind and much of our attention is still devoted to our needs. When we empathize we cannot fully escape our own needs but we discipline ourselves to use our feelings as instruments of

cognition.

> Sympathy is reactive. It turns our attention back on ourselves. The empathizer tends to abandon his self-consciousness. He does not feel with the other person as if running along a parallel track. The sense of similarity is so strong that the two become one--his own identity fuses with the identity of the other" (1963, pp. 8-11).

The present research and theoretical literature about the empathic process suggests that it has several dimensions. Behavior associated with these dimensions allows for some consistency of interaction between people. The puzzling aspect of discussing and studying any one of the dimensions of empathy is the ambiguity associated with each. In addition, there seems to be general agreement that empathy as a process is ordered and consists of other processes, but there is confusion among writers as to the definitions of each of these steps and their order in the empathic process.

For the purposes of this study, empathy will be defined as a process which can be delineated into steps. Each step in the process is characterized as a developmental step and thereby may be examined as a characteristic of development in terms of response. Thus, empathy as defined for the purposes of this study is a process which includes the following steps:

1) A willingness to go beyond the self, to let go of one's feelings of self, temporarily.
2) A willingness to "take in," to allow another to feel at one with one's self.
3) To assume the "internal frame of reference" of another (to merge with the other; be attuned with the other; transfer

oneself to the other).

4) To identify the world as the other perceives the world with no judgment about his external frame of reference, as if playing his role.

5) To respond to the other either with words, actions, or both relating to the other an understanding of his concern (to respond with empathic understanding).

A differentiating between one's self and the other, between content and feeling takes place within each step of the empathic process. An integration of one's self with the other, of feelings with specific content occurs between each step in the empathic process.

Purpose of the Study

Empathic responding is dependent upon some knowing and understanding of the process. This knowing may be in part a cognitive knowing and in part an emotional knowing. For maximum control over its use as a facilitating agent in the classroom, one must know and understand the process, know when one is in an empathic state of being, and of most importance, know how to arrive at and maintain an empathic state of being. Differentiated in this thesis are a knowing which is cognitive and one which is emotional, the integration of which ultimately results in a response of empathic understanding. The level at which one can respond empathically is dependent upon the development of his knowing and loving capacities in relation to each other. Thus, one who is fully aware of his total state of being, cognitively and emotionally, can order and

control his involvement with another person, thereby making it more possible for him to respond empathically. How one orders his emotional or cognitive knowing is highly individual, and arriving at an empathic state, therefore, may also be very individual. There appear to be, however, experiences common to all men which facilitate arriving at an empathic state of being. Rollo May shares the qualities inherent in such experiences:

> ". . . learning to relax, mentally and spiritually as well as physically, learning to let one's self go into the other person with a willingness to be changed in the process. It is the great giving up of one's self, losing one's personality temporarily and then finding it a hundred fold richer in the other person" (1967, p. 97).

How does one learn to relax in the state of "Future Shock" or a harried classroom? Katz suggests that it is through inspiration and perceiving beauty that man can arrive at an empathic state. He states:

> ". . . we experience empathy when we project more complex emotional states. We discover our inner feelings about inspiration and beauty in external objects of a cathedral, we describe the structure as being 'spiritual' and tend to believe that such qualities objectively belong to the structure itself. The specific combination of stone, line, and color becomes for us a tangible expression of beauty so that we apprehend the total structure as a Gestalt which is more meaningful to us. Without such empathy we would respond to details, apprehending the edifice of an artistic whole" (1963, p. 85).

Thus, it follows that to elicit an empathic response, one must arrive at a state of letting the self go, temporarily. Suggested within the writings of May (1967) and Katz (1963) is the necessity of the individual to learn how to experience beauty and be refreshed through inspiring thoughts.

Learning to focus beyond the self, then, assists one to relax and

become willing to receive into his being an external world, whether it be a person or the external environmental setting.

This investigation, then, is concerned with teaching people how to arrive at an empathic state of being. It was hypothesized that a setting (operationally defined) providing an experience of inspiration and beauty would assist prospective teachers to arrive at a state of empathic understanding.

CHAPTER II

REVIEW OF LITERATURE

Introduction

Empathy, for the most part, has been studied as a variable in relation to other variables. In most cases, researchers formulate limited definitions of empathy and that is usually in terms of the characteristics unique to their research. Although conclusions about empathy drawn from a variety of studies cannot be assumed reliable because of the unclear and inconsistent conceptions of empathy, a review of the literature reveals present-day conceptions about empathy and can be useful for arriving at tentative conclusions about its role in education and teacher preparation.

All studies included in this review contained definitions of empathy using global terms such as assumed similarity (Press, 1966) or sensitivity to current feelings (Truax, 1963). The studies of Carl Rogers (1951) were a notable exception. He defined empathy in terms of steps taken to arrive at a state of empathic understanding. The definitions of these steps were operationalized for the purpose of research.

This review is divided into two basic sections: a review of the research literature concerning the measurement of empathy; and a review of the research literature of empathy as a critical variable in effecting behavioral change.

Studies treating empathy as an individual variable and a mass variable are included for the purpose of gleaning insight into the dynamics

of the empathic process and the present state of the art.

Tests for Empathy

There are only a few tests available for empathy, which may result from a lack of general consensus as to the nature of the process.

There are well-known tests which treat empathy at an individual level: Dymond (1949); Truax (1961); Carkhuff (1966). The Dymond Test measures an individual's ability to "transpose himself into the thinking, feeling, and acting of another person, to structure the world as he does" (1949, p. 127). The test, however, is taken with pencil and paper and necessitates an individual's putting himself into projected situations and persons to respond. Missing is a measure of a spontaneous response from which empathic understanding can be observed.

Truax (1961) designed The Accurate Empathy Scale[1] ". . . to measure a conception of empathy which involves the sensitivity to current feelings, and the verbal facility to communicate this understanding in a language attuned to the patient's current feelings" (1963, p. 256). The instrument has an eight-point scale which guides trained judges in estimating a therapist's empathic understanding. The advantage of such

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[1] The Accurate Empathy Scale was constructed so that "trained judges could reliably rate the extent of empathic understanding by the therapist occurring in tape-recorded samples of psychotherapy. The scale has a high level which measures the therapist's responses that are 'I am with you' in contrast to measured low level responses which measure whether the therapist is preoccupied with his own intellectual interpretations and is less aware of the client's being" (1963, p. 256).

a measure is the observation taken while the subject is involved in a "here and now" relationship with another person. This is very advantageous in that empathy is a variable of interpersonal exchange.

The Carkhuff scale, Empathic Understanding in Interpersonal Processes, III (Carkhuff, 1969) was created out of the Truax scale for the same purpose as the Truax scale, but Carkhuff reduced the number of levels from eight to five. Trained judges rate subjects on the basis of observations of empathic understanding.

The Empathy Test (Kerr & Speroff, 1951) measures an individual's ability to judge other people's responses in specified situations. This is a measure of "mass empathy" (Norman & Leiding, 1956) because an individual ". . . is required to predict the combined responses of a group of individuals rather than a single person" (1956, p. 79).

Another attempt at developing a test for empathy was made by Hogan (1969). He developed a 64-item self-report measure of empathy which he ". . . constructed by comparing the responses of groups with high and low rated empathy, using the combined MMPI-CPI item pool." Hogan is concerned with showing the test's relevance to an assessment of moral conduct.

Bachrach, Mintz and Luborsky (1971) compared three methods of assessing the quality of a psychotherapist's empathy from brief segments (i.e., four minutes) of tape-recorded psychotherapy sessions. The three methods compared were The Accurate Empathy Scale (Truax, 1961), The Conjunctive Empathy Scale (Bachrach, 1966) and The Raskin Empathy Scale (Raskin, 1965). Their results showed that these three scales

were measuring the same quality and that the Raskin scale was the most economical measure to use because of its simplicity. It should also be noted that the empathy variable under examination was from a wide range of empathy based on ratings made on The Raskin Empathy Scale.

Chapman (1971) developed and validated ". . . an instrument to test a subject's ability to identify the emotion or emotions expressed by another" (1971, p. 281). Chapman labeled this ability "affective sensitivity," and developed a scale from counseling interviews using the Interpersonal Process Research Technique (IPR).[2] The affective sensitivity scale as developed in this study did not differentiate between persons judged high and low in empathic regard. A unique quality of this study was the congruence of theoretical and operational definitions of empathy. The subject was asked to "feel as the other." "Some studies have asked subjects to predict future client behavior or to determine the counselor's next best statement" (1971, p. 282).

Studies have addressed the agreement of correlation between an individual empathy measure and a measure of mass empathy. Norman and

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[2] "The IPR technique operates in the following manner: A counselor and client conduct a counseling interview within the studios of the closed circuit television installation. The studio is curtained, the cameras are preset and unmanned so that a minimum of distraction exists. The interview is conducted and the two participants are video-tape-recorded on a split screen with head and torso head-on views enlarged as much as the screen permits. Immediately after the interview is concluded, the client witnesses a playback of the interview in the presence of another trained counselor. The second counselor encourages the client to describe his feelings, interpret statements, and translate body movements at various time during the replayed interview. The counselor or subject may stop the playback and discuss recalled feelings and elaborate on meanings" (1971, p. 281).

Leiding (1956) compared the Dymond Test, a measure of individual empathy, with a procedure devised by Norman and Ainsworth for the measurement of mass empathy. Both approaches have been criticized for not isolating the factor of projection so three scores were derived from both measures: raw empathy, projection, and refined empathy. Norman and Leiding found correlations about zero between the individual and mass empathy measures for all these variables but significant correlations were obtained between these variables within the measures. Projection is a factor found in both tests, more seriously in the mass approach.

Hastorf and Bender (1952) also write that the projection factor seems to be a significant factor in the Dymond Test (1949) and in The Empathy Test by Kerr and Speroff (1951). They found its significance greater in the mass approach than in the individual approach.

Hall and Bell (1953) correlated the Dymond Test and The Empathy Test to find the agreement between the individual empathy factor and the mass empathy factor as did Norman and Ainsworth, reported in the Norman and Leiding study (1956). Hall and Bell found an average correlation of .02 between the Dymond and Kerr tests, comparable to the correlations in the Norman and Leiding study.

Many studies have addressed the validation of The Empathy Test (TET) by Kerr and Speroff (1951): Bell (1955); Van Zelst (1953, 1956); Tobolski (1956).

The 1953 study of Van Zelst suggests that The Empathy Test is a valid predictor of leadership potential, popularity among associates, but does not provide a measure of how the subject himself feels nor how

someone else feels. Van Zelst concluded that The Empathy Test is "promising for use in the batteries undergoing experimental validation for the selection of leaders, sales personnel, and counselors" (1953, p. 476). He later concluded that The Empathy Test ". . . may be profitably employed in the prediction and selection of potential union leaders" (1956, p. 294).

Bell (1955) also attempted validating The Empathy Test but was not successful. He concluded that the subjects scoring high on it ". . . do not estimate the group's interpersonal estimate of each other any more effectively than low scores." Suggestion has been made of other areas that may prove useful in investigating the actual kinds of behavior measured by TET.

In a study of 32 salesmen of two of Chicago's largest new and used automobile agencies, The Empathy Test was again used (Tobolski, 1956). Tobolski found that The Empathy Test was a significant predictor of sales records, of job success of sales crew members as ranked by their sales managers, of new car salesmen as tentatively attributed to the differential effects of television advertising on the selling operation for new and used car sales, and that the success ranking of used car salesmen was very inefficient, indicated by correlations equal to .12 and .17 (1956, p. 311).

Thorndike (1959) reviewed the studies validating The Empathy Test and concluded that the test could not be recommended "as either a useful practical device or a contribution to the description and understanding of an individual" (1959, p. 59).

Hall (1965) also reviewed The Empathy Test and studies of validation and reliability. He concludes:

> "In view of these negative features and the implications that the test is more a measure of general information and prediction of opinions than of interpersonal empathy, there appears little to recommend this test for the purposes stated by the authors" (1965, p. 215).

The results of the above studies and the reviews by Thorndike and Hall indicate that The Empathy Test is questionable in measuring what it purports to measure, mainly the ability to predict the behavior of the "generalized other" (Thorndike, p. 50).

A study was done to correlate an individual's interest, as reflected in one's capacity to predict his interest pattern on the Kuder Preference Record and one's score on The Empathy Test. The purpose of this study was to show the relationship between self-awareness as measured by the Kuder Preference Record and insight into one's behavior as is purported to be measured by The Empathy Test.

No significant correlations were made between the two measures and "the results suggest a discrepancy between empathy as used by Dymond (1949) and more generally by clinicians and empathy as it is measured by The Empathy Test" (1949, p. 422).

Caracena (1969) attempted ". . . to account for the lack of relationship between The Accurate Empathy Scale and subjective perceptions of empathy" (1969, p. 510). Caracena raises questions as to the construct validity of The Accurate Empathy Scale in as much as he found only expressions of interest or involvement to relate to both judged and subjective ratings of empathy. Verbal dominance and quantity of

words relate to The Accurate Empathy Scale and clarity of expression relates to subjects' perceptions of empathy.

The empathy score as defined by Henry Smith is a "measure of assumed similarity" (Press, p. 113). "The number of questions a man answers for others in the same way he answers them for himself is his empathy score" (Press, p. 113).

An actual similarity score, on the other hand, "is the number of times in which two people have independently made the same response about themselves. One can actually measure the actual similarity between them without them being aware of the other" (Press, p. 113).

By dividing the assumed similarity score by the actual similarity score one arrives at the "empathic accuracy score" (Press, p. 113).

Hastorf, Bender and Weintraub raised a question of validity of the raw empathy score because a subject's responses were found to be "more highly related to his own responses than they were to the responses of the associate predicted for" (1955, p. 342). Thus, the present authors attempted to correct the invalid empathy score and called it the "refined empathy score." This score includes credit for moving away from oneself when one predicts for another. This study and one done by Dymond (1949) found that predictions made on an empathy test "tend to conform to a cultural stereotype or norm" (1955, p. 343). In addition, it was found that subjects who themselves had definite preferences and chose associates who gave midscale responses obtained high refined empathy scores. With this knowledge the authors concluded that it would be possible to predict a subject's empathic ability without scoring his

predictions. The authors concluded their study by suggesting that another means of measuring empathic ability ought to be investigated, namely one that would correlate with the steps in the empathic process.

The consistent questions concerning the validity of the tests for empathy raise the issue of finding another means for measuring empathy.

Empathy: A Variable in Behavioral Research

The present review of the research literature identifies empathy as a critical variable in effecting behavioral changes in the counseling relationship. Clinical psychologists have been most active researchers of empathy as a variable in the counseling relationship. The concern of research has been to find ways of measuring empathic ability, to discover its effect in facilitating health, and to find methods of teaching people how to develop an empathic skill. The last section of this review was concerned with the measurement of empathic responsiveness. This section presents studies illustrating empathic understanding as a critical variable in the counseling relationship and those studies in which factors of learning empathic understanding have been isolated.

Garfield (1971) studied a predominantly non-client centered therapist group to find the relationship between accurate empathy, warmth, and genuineness to outcome in psychotherapy. He found no relationships were secured between tape-rated measures of the three therapeutic conditions and a variety of measures of outcome. Accurate empathy and warmth were significantly correlated in a positive direction. Both of these variables were negatively correlated with genuineness.

The association between adolescent suicidal behavior and the lack of empathic ability on the part of the parents was investigated by Mary Hill (1970). This investigation tested for differences between the empathic capacity of parents of suicidal adolescents as compared to parents of other emotionally disturbed adolescents who were not suicidal. A third group, well-adjusted adolescents and parents, was tested for gradations in empathic capacity. In this study, suicidal was defined as "threats, remuniations, gestures or attempts of sufficient magnitude to constitute the primary reason for referral to a psychiatric facility" (1970, p. 472). Hill found that parents of suicidal adolescents showed less empathic capacity than parents of non-suicidal, emotionally disturbed adolescents and parents of well-adjusted adolescents. Empathic capacity was measured by the Peebles Check List of Personality Traits and a special adaptation of the Jones Ego Identity Scale. An adaptation of the Rorschach Technique was used to measure the parents' ability to predict more unconscious aspects of the adolescents. All three of these measures supported the hypothesis that parental empathy would follow a continuum with parents of the suicidal group showing the least empathic capacity and parents of the well-adjusted adolescents showing the most.

In 1970, Truax investigated whether the average number of therapist words per unit time is related to his degree of accurate empathy and to patient improvement during therapy. Again, as in his other studies, Truax used The Accurate Empathy Scale as a basic measure of conditions, and again as in his other studies, used patients from a mental institution. The results showed a moderate positive relationship between the

average proportion of therapist talk and his level of accurate empathy. In addition he found that there is a moderate but positive relationship between the average proportion of therapist talk and the two overall measures of patient improvement. Thus, the higher the proportion of the therapist talk, within normal limits, the more empathic the talk and the better the patient outcomes.

In other studies Truax used The Accurate Empathy Scale with patients from mental hospitals to test relationships between empathy and other factors. Reporting on four different studies, Truax's results suggest that the "level of accurate empathy is indeed related to the outcome of constructive personality change" (1963, p. 262). In this same article, Truax reports a study of which the data shows that it is the therapist who determines the level of accurate empathy (1963, p. 263).

Truax, Wittmer and Wargo (1971) hypothesized that "patients receiving high levels of therapeutic conditions (accurate empathy, non-possessive warmth, and genuineness) during group psychotherapy will show greater evidence of constructive personality change than patients receiving relatively low levels of these conditions" (Truax, et al., p. 137). A positive relationship was found to exist between the level of conditions offered hospitalized subjects during group psychotherapy and the degree of therapeutic outcome. The patients were primarily diagnosed as schizophrenic and those who received relatively low levels of conditions, as a group, showed negative or deteriorative change on the measurement scale whereas patients receiving high levels of

conditions showed positive change on the scale. The Accurate Empathy Scale was used to measure the therapeutic conditions.

Mullen and Abeles (1971) investigated the relationship between accurate empathy and "liking." Tape recordings of interviews with 36 clients were divided into successful and unsuccessful therapy outcome groups based on changes of pre and post testing on the Minnesota Multiphasic Personality Inventory Clinical Scales. The results indicated

> "that high liking and high empathy together did not predict successful outcome, that a 'post hoc' analysis showed a positive relationship between high empathy alone and successful outcome. The results also indicated that inexperienced therapists were generally less empathic than experienced therapists" (Mullen, pp. 39-43).

Finally, for experienced therapists, accurate empathy and liking were not related but these variables were significantly correlated with inexperienced therapists.

The relationship between projection, empathy, and reality operationally defined was the focus of a study done by Norman and Ainsworth (1954). They hypothesized that when these three variables were operationally defined, "projection will be negatively correlated with reality and empathy, whereas empathy and reality will be positively correlated with each other" (1954, p. 52). In addition, it was hypothesized that adjustment will be more closely correlated to reality and empathy than will projection. The Guilford-Martin Inventory of Factors GAMIN was given to 74 college male and female freshman students. The results indicated that reality and empathy are significantly correlated with adjustment. Projection and adjustment correlated on one trait, denial of lack of ascendance. For both intra- and intertrait relationships,

there appears to be a hierarchy of order of correlation with adjustment as follows: projection lowest, reality next, and empathy highest[3] (Norman & Ainsworth, 1954).

Swenson (1970) investigated the "relationship between the counselor's ability to express conditions for positive growth in the therapeutic situation and certain personality characteristics of the counselor" (1970, p. 1027). One pertinent result showed that high counseling performance was associated with counselors

> "who were neither extremely aloof (reserved) nor extremely sociable (outgoing), who tended to be somewhat casual (expedient) in manner, who were neither extremely conservative (respecting established ideas) nor extremely experimental (analytical) in approach, and who were neither extremely lax (follows own urges) nor were extremely controlled (self-discipline)."

Counselors' verbal responses and performance were strongly and positively related.

Allport's theory that "empathy and prejudice are inversely related" was tested in a study done by Erb (1970). Prospective teachers were used as subjects in hope that the results of the study would be of value in helping them understand racial attitudes. All were white college

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[3] In this study, projection was defined as including the following aspects: "(a) it is defensive; (b) it is unconscious; (c) it involves undesirable characteristics which threaten the ego; (d) it occurs when the ego cannot repress the characteristics; and (e) it is self-deception and therefore a reality distortion" (1954, p. 54). Empathy operationally defined is as follows: "An individual empathizes when he says others possess a trait in question and others actually do have it when speaking of themselves" (1954, p. 55). Reality in this study ". . . could be called insight (the ability to perceive the world as others do) since there is a comparison of how the individual's perception of others conforms to the group's perception of others" (1954, p. 55).

seniors. The results showed that there was no evidence of an inverse relationship between empathy and prejudice. The relationship between personal contact and prejudice was highly correlated. Change orientation was significantly negatively correlated with prejudice. Religiosity and prejudice were hypothesized to be significantly related. The findings failed to support this hypothesis. Efficacy, the degree of control that a person feels he has in his relationship to the social and physical environment, was significantly negatively related to prejudice. High scores on efficacy, indicating a feeling of being in control, were related to positive racial attitude scores (1970, p. 5234).

Stotland and Dunn (1963) investigated whether an individual's level of anxiety would be influenced by the level of anxiety he perceived in an "identification model." One-half of the 132 male and female, freshman and sophomore, introductory psychology subjects were arbitrarily assigned an attribute of non-functional similarity (having worked on similar tasks) with a paid model. The other half had not had common experiences with their model. One-half of the subjects under each of these conditions were exposed to the model's public failure. Self reports indicated empathy when the model was similar, empathy being defined as a special case of identification in which the identifier acquires the model's level of anxiety (Stotland & Dunn, pp. 532-540).

Steven Daniel studied the influence of leader empathy (affective sensitivity), participant motivation to change and the leader-participant on changes in affective sensitivity of the T-Group Participants (Daniel, 1970).

He found that changes in the affective sensitivity of the participants were not a function of the trainer's initial affective sensitivity rating. In addition it was found that changes in the "participant's affective sensitivity scores were related to the combination of the most significant trainer's initial affective sensitivity, the participant's motivation to change and the quality of the trainer-participant relationship" (Daniel, pp. 5229-5230).

John Vanderpool, M.D., and Ernest Barratt studied the psychophysiological correlates of empathy and found patterns in individual analysis of the relationship between the psychological variable and the physiological variable (Vanderpool, 1970). For example, Vanderpool found that "subjects who showed low H. R. (heart rate) acceleration, greater initial skin response to the interview, and higher basal skin resistance did best on the Empathy scores" (1970, p. 467). Vanderpool and Barratt recommend studying empathy in terms of the psychological and physiological correlates of the process.

The empathic ability of children between the ages of three and one-half to six and one-half years of age was investigated in a study by Burns and Caney (1957). The empathic ability of these children was tested by questioning them about a set of pictures. The results showed that the number of empathic responses given by younger subjects (ages three to five) was significantly lower than the number of such responses given by older subjects (ages five to six and one-half).

Reddy (1968) studied the effects of immediate feedback on the learning of accurate empathy. The subjects were divided into three

feedback groups: immediate, delayed, and control. They were instructed briefly and asked to respond aloud empathically to a simulated psychotherapy film, the pre-measure. The subjects were then shown four additional films and were given appropriate feedback as to their empathic performance. The subjects received no feedback when they responded to the sixth film, the post-measure. Pre and post responses were rated independently on a five-stage accurate empathy scale. Both the experimental groups made significant gains. An analysis of the post-measure indicated that the immediate feedback method was superior over the delayed method (1968, p. 62).

Anthony and Wain (1971) compared two methods of selecting trainees for an empathy training program. One method involved obtaining the prospective trainee's pretraining levels of empathic communication. The other method involved presenting the prospective trainees with a brief analogue of the training program for which they were being considered and assessing the effects of the brief training analogue. The result showed that the two methods were correlated significantly with training outcome, but the training analogue method had a significantly closer relationship with outcome measures.

Dymond (1950) studied empathy test Rating Test B, and found that females were slightly better predictors than males. She also found that females were more easily predicted than males by both males and females. From these results Dymond hypothesized that the "so-called empathic ability might be reciprocal in nature, so that it is easier to empathize with a person who has high empathy than with one whose empathy is low"

(1950, p. 345).

In this same study, Dymond did a TAT analysis of the subjects in high and low empathic groups. She found that there were certain common elements to be found in the highly empathic group and other common elements in the low group. These factors were related to four categories: family atmosphere and relations; orientation to others; goals; concept of self (1950, p. 349). The highly empathic subjects had close interpersonal family relationships. These subjects found the family as a source of support and the family was not an important problem area in their lives. The low empathic group, however, felt aggression against parental authority. They shared in common hostility against overprotection, conflict with siblings, and had experienced the disrupted relationships between their parents, either as a result of death or incompatibility.

Highly empathic subjects were found to have great interest in other people. They are described as being warm, affectionate people whose happiness requires good relations with others. These subjects have many friends and are equalitarian in their relationships.

The low empathic group, on the other hand, were found to be "lone wolves." They are characterized by mistrusting others and are afraid of getting hurt. They are unable to relate themselves to others even when they desire to do so. In a relationship, the low empathic group are egocentric and use others for their own purposes, especially for feelings of power and status that it gives them. They have a need to dominate others and have few friends, finding it hard to make friends.

Dymond describes the low empathic group as "takers" unable to give emotionally to others. Basically they are uninterested in other people except as others contribute to their own welfare.

The goals of highly empathic subjects are pursued in terms of their home and family. They happiness involves forming a close relationship with another which would be lasting and satisfying. Their mail drive is seeking to establish a close, mutually interdependent relationship (1950, p. 349).

The goals of the low group are related to self-aggrandizement. Others look up to them and they are occupationally well-known. Their drive appears to be for success which is achieved either through individualistic achievement or dominance over others (1950, p. 349).

The self-concept of the highly empathic group shows them to picture themselves as sensitive, idealistic, romantics, aware of social problems and found to be sympathetic toward the underdog. They are aware of the need for others for self-fulfillment (1950, p. 349).

Subjects with low empathic ability admire people capable, confident, cautious, rational and under control. These subjects were often found to be insecure and built up a shield of superiority, not caring for others in order to protect themselves (1950, p. 349).

Dymond used the California Ethnocentrism Test to corroborate and amplify some of these same characteristics in high and low empathic subjects.

The Dymond study (1950) differentiated significantly between high and low empathic subjects to allow for an analysis of characteristics

common within each group and uncommon between two groups.

Once again educators can learn from the therapeutic setting in which the effect of teaching interpersonal communication skills to clients results in their learning how to manage their lives effectively without need for further therapy (Carkhuff, 1971). Carkhuff and others (Berenson, 1970; Bierman, Carkhuff & Santilli, 1971; Carkhuff, 1969; Carkhuff & Griffin, 1971; Carkhuff & Bierman, 1970) have studied programs in which training a significant other in a relationship condition has positive effect upon the development of both the client and his symbiont. Studies comparing experiential training with systematic training in experiential dimensions has given favorable results to systematic training over experiential training (Berenson, et al., 1966; Carkhuff & Bierman, 1970). Carkhuff and Berenson (1967) have extended behavior modification approaches in training significant others. Carkhuff's argument is that "while systematic approaches were not capable of discerning and describing experiential dimensions, systematic approaches were superior to the experiential approaches in achieving the communication of experiential dimensions" (Carkhuff, 1971).

While Carkhuff found treating a significant other in a therapeutic relationship facilitated the client's learning, he later found that training the client himself in the skills necessary to function in society was a more efficient and effective therapeutic step (Carkhuff, 1971).

Carkhuff (1970) utilized a comprehensive training program integrating interpersonal skills and counterconditioning with ghetto school children who were training problems expressing themselves in predomin-

inantly white classes. He trained separately teachers, counselors, and students in communication skills necessary to function effectively with each other. The students were primarily taught to initiate self-expression and then were systematically desensitized to the anxiety attendant to expressing themselves in the school setting. This was done in gradations of difficulty by first exploring the problems in imagery, then role-playing them, and finally acting on them in live classes. Exceptionally high ratings on classroom self-expression were received by the students. In this study students were not the only ones prepared, as the teacher and the class were also prepared for the students.

As illustrated by this research, a most direct, efficient form of training as treatment in the therapeutic situation is to train the client himself in the skills which he needs to function effectively.

Another study in providing a learning experience was done by Blane (1968) in which three counselor groups of ten were measured on empathic understanding before and after the treatment situation. His results showed that the positive supervision group showed significant differences between the pre and post treatment empathic understanding scores. The no supervision and negative supervision groups moved toward higher empathic understanding scores from pre to post treatment; the change was not significant. This study also illustrates the results of training in the affective communication skills.

Truax and Lister (1971) did a study "to determine whether significant improvement in accurate empathy and nonpossessive warmth for experienced counselors could be effected over a forty hour training period"

(1971, p. 120). They hypothesized that counselors presently functioning in the field would have the background and experience to enable them to make rapid improvement in the levels of empathy and warmth provided to clients. They also hypothesized "that counselors initially highest on measures of empathy and warmth would change most through training, and that counselors initially lowest on empathy and warmth would show least change" (1971, p. 121). The results showed that counselors initially high and counselors initially low made approximately equal gains on empathy. "No overall gains were made on nonpossessive warmth, and there was evidence suggesting that some decrease may have occurred, particularly within those counselors initially providing high levels of warmth" (1971, p. 120). The data in this study were compared with those of other studies in training programs not providing specific training in empathy and warmth. The comparison data were consistent with the hypothesis that gains on empathy and warmth levels of counselors occur after the initial graduate training program.

David Aspy (1967) investigated the influence of a classroom's emotional climate upon the cognitive growth of 120 third-grade students matched according to sex and IQ. Teachers were measured on levels of empathy, congruence, and positive regard. The results indicated that higher conditions enhance achievement while lower conditions retard it.

Aspy and Hadlock (1967) did a study to determine the level at which the teachers were functioning in their classroom interactions. Student performances were assessed on different dimensions in order to determine their relationship with the teacher level of functioning. The results

showed that

> "students of teachers functioning at the highest levels of facilitative conditions demonstrated higher levels of academic achievement than students of teachers functioning at the lowest levels of conditions. The students of the highest level teacher gained an average of two and one-half academic years over the course of one academic year while the students of the lowest level teacher gained an average of six achievement months over one academic year" (Carkhuff & Berenson, p. 297).

Thus, efforts have been made to teach facilitative skills.

Summary of the Literature Review

There are two basic types of empathic ability measures, an individual measure and measures of mass empathy. In both cases, the instruments are questioned on grounds of validity. It appears that measures of empathic ability are unable to differentiate consistently between empathic ability and projection. In other instances criticisms are made against the instrument measuring another character trait such as leadership.

In all tests for empathic ability, a global definition of empathy is offered. For a greater opportunity to isolate the empathic ability, a defining of the processes is needed as suggested by Hastorf, Bender and Weintraub (1955).

Many studies have examined the effect of the empathic ability in relation to other variables. Common among all studies is an hypothesis and results illustrating its significant effect in human relationships. Also found are studies illustrating the relationship of empathic ability to emotional health. Uncommon among these studies is a consistent defining of the empathic ability.

It was seen that teaching the empathic skill was successfully accomplished. Behavior modification techniques have been successfully employed in systematically training people to respond in a way conducive to adjustment in the everyday world of humanity. It was also seen that training interpersonal skills to children and teachers effected positive changes in the children's expressing of themselves in the classroom.

The studies cited in this review illustrate the possibilities associated with training people to respond empathically to others.

CHAPTER III

METHOD

Hypotheses

The purpose of the present study was to investigate the following hypotheses:

1) Subjects involved in an aesthetic-religious experience will respond significantly more often at a higher level on The Empathic Process Scale for Verbal Behavior than subjects in a didactic-content condition or in a condition combining the two experiences.
2) Subjects in the didactic-content condition will respond significantly more often at a higher level on The Empathic Process Scale for Verbal Behavior than subjects in the combined condition.

Subjects

Sixty students in an Early Childhood Program in the School of Home Economics at the University of Massachusetts were the subjects for this present study. All subjects selected were preparing to teach preschool and primary grades. The 60 subjects were randomly assigned to four groups of 15. Only female subjects were used because of the scarcity of men in this program. All subjects were between the ages of 18 and 23 and were unmarried and without children. The above information was

acquired by a questionnaire prior to random assignment of the subjects to groups (Appendix A).

Procedure

Prior to the day of experimentation, each subject was directed to arrive at a specified classroom at a particular time. Upon arrival, subjects were asked to wait outside of the classroom until it appeared that everyone had arrived. At that time the door was opened into a dimly lighted, comfortable, lecture auditorium where soft music was playing. A table was immediately inside of the door where each subject stopped to register his presence, to pick up an Instruction Sheet (Appendix A), a Response Form (Appendix A), and a pencil, and was directed by the research assistant to be seated in the first two rows of the auditorium. All subjects were instructed to remain silent during the entire presentation. When everyone was seated, the lights were turned off and the same procedure was followed for all instructional conditions.

After each presentation subjects were given five minutes to respond and then were thanked for their participation in the experiment. They were instructed not to discuss their experience with anyone until Friday. They were told that the following week they would learn the basic nature of the study and their contribution as participants.

There were four instructional conditions to which subjects were randomly assigned: aesthetic-religious; didactic-content; combined condition; and control condition--no instruction. (See Table I on the following page.)

TABLE I

INSTRUCTIONAL CONDITIONS

Aesthetic-Religious	Didactic-Content	Combined	Control
1	1	1	1
2	2	2	2
3	3	3	3
.	.	.	.
.	.	.	.
.	.	.	.
n=15	n=15	n=15	n=15
T_{A-R}	T_{D-C}	T_{cmb}	T_{con}

Instructional Conditions

The aesthetic-religious condition was designed to provide an aesthetic-religious experience which would assist the subject in discovering his inner feelings about inspiration and beauty as he perceived an external world through the medium of a slide-tape-poetically spoken-music presentation. It was hypothesized by this researcher that the subject, through this experience, would move his feelings beyond himself "as if" the feelings of inspiration and beauty were inherent in the objects he was observing and the melodic sound and inspirational words he was hearing. This experience of moving beyond the self was facilitated by the two mediums of a visual projection and an auditory presentation, which provided the means of attending beyond the self in thoughts and

feelings. The stimulation of the music and slide projections accompanied by inspirational words was designed to attract the attention of the viewer, freeing him from himself and everyday concerns. Thus his feelings and thoughts could become focused upon a scene embodying an idea by which he could relate himself to the greater universe. Such an experience is psychologically "safe" in that there is no risk of feeling the pain or unknown feelings of another nor is there the risk of exposing one's own feelings. This researcher felt that going beyond the self is so critical to being able to empathize with another that to once experience deeply in one's emotions and consciousness this release through the beauty of creation potentially could result in untold joy. Psychologically speaking, an individual having such an experience is provided a sense of its safety, of fearing less going beyond his own person for experiencing and perceiving his external world. Once this sense of safety is his, a person is then freer to allow his feelings to be shared by another person and to allow another human's experience to become his for a time. It is the focus provided for the subject, in this condition, which facilitates his going beyond himself that should result in his being immediately more empathic as measured by The Empathic Process Scale for Verbal Behavior (Appendix B) than in the condition where one must intellectually integrate into his emotions the steps in the empathic process so that he can respond with empathic understanding. This procedure, though viable, theoretically should take a longer time because the focus is volitionally determined and dependent upon the intellectual and emotional well-being of an individual to integrate an

emotional process through the intellect, whereas in the aesthetic-religious condition, the focus for thoughts and emotions is provided through the media of music, colorful photos of creation, and words of inspiration spoken in a soft, comforting voice.

Upon entering the room for the experiment, the subjects were given the necessary materials and then listened to music for three to five minutes while the lights were turned very low. The 25-minute slide-tape presentation for the aesthetic-religious condition then began. Following the slide-tape presentation, a minute of time elapsed and then an eight-millimeter projection of the critical incident used for a post measure was given (for description, see Appendix B). Pencils and Response Forms (Appendix A) given out as the subjects entered the room were placed by the subjects on a table near the door as they left the room. The same post measure procedure was used for all instructional conditions.

In the didactic-content condition a 30-minute tape-recorded verbal presentation about the empathic process, defining it and delineating its steps while relating it to facilitating learning, was presented (Appendix D). The same general instruction and posttest procedure was followed as in the aesthetic-religious condition with the exception, of course, of the presentation of the instruction. The Instruction Sheet for this condition can be found in Appendix A.

In the combined condition the instructional procedures of the two previously described conditions were combined to elicit the effect of verbalization after an aesthetic-religious experience. This condition

took an hour to present. The slide-tape presentation was presented immediately followed by the tape-recorded presentation about the empathic process and empathic understanding immediately followed by the eight-millimeter film of the critical incident. The same procedure was followed regarding entering and leaving the room and the same Response Form was used as in the other conditions (Appendix A). The Instruction Sheet (Appendix A) was unique to this instructional condition.

The control group entered the lowly-lighted room with soft music playing, picked up an Instruction Sheet (Appendix A), and after a period of three to five minutes was shown the eight-millimeter critical incident film. The same Response Form was used and the dismissal procedure used in the other groups was followed in this group as well.

CHAPTER IV

RESULTS

A single-factor posttest-only control group design and analysis of variance procedure were employed to examine the overall immediate treatment effect (Stanley & Campbell, 1963). Other tests were made between all two-way combinations of treatment groups to determine where and in what direction significant differences occurred.

Measures

After each treatment, the subjects were shown an eight-millimeter film portraying a "critical incident": two preschool girls playing out or doors with a doll carriage, a doll, and a blanket of one of the girls.

While playing, one of the girls tries to take the blanket away from the one who owns it and an ensuing struggle to possess the blanket results.

After the subjects viewed the film, they responded to the following question printed on a Response Form (Appendix A) provided them: "You are a teacher in this situation. How would you respond?" The intent of this question was to elicit a verbal response from the subject concerning her feelings about the situation and what she would do with her feelings in terms of her empathic response to the children in the filmed situation. These responses were then evaluated in terms of a level of empathic understanding defined in The Empathic Process Scale

for Verbal Behavior.

Three trained judges independently reviewed each written response to the critical incident using The Empathic Process Scale for Verbal Behavior. This scale was developed by this researcher to reflect the steps in the empathic process, the process that one goes through when one ultimately responds with empathic understanding. Each step represents a level or a degree of empathic understanding with level six defining a fully empathic response.

The Empathic Process Scale for Verbal Behavior was developed for the purpose of this study--the behavior to be sampled is a written verbal response, representative of a subject's empathic understanding. This researcher felt it would be inappropriate to use a scale which records for many stimuli in audio-visual recording. For example, the Carkhuff scale was designed to be used by raters observing the total behavior of the subject in the counseling relationship.

The purpose in designing The Empathic Process Scale for Verbal Behavior was to delineate the steps in the empathic process in terms of verbal definitions so that numerical values could correspond to degrees of empathic responding. This study utilized the empathy variable to include more than the global terms of warmth, genuineness, and positive regard which seem always to be related to a question of "how warm," "how genuine," and "how much positive regard?" The answers are always very subjective, which thus requires raters who are subjectively "in tune" with each other. While high reliability coefficients among judges can be found, these studies never really reveal insights to answer the

questions of how warm, or how genuine, and so on.

The Carkhuff scale, an example, is appropriate for evaluating global definitions of empathic understanding behaviors such as warmth and genuineness in the counseling relationship. This scale is inappropriate, however, to evaluate the empathic response as defined by this researcher for this study. A comparison of these two scales will illustrate the necessity of developing The Empathic Process Scale for Verbal Behavior for the purposes of this study.

The Carkhuff scale of Empathic Understanding in Interpersonal Processes, III (Carkhuff, 1968; Carkhuff & Berenson, 1967) has five levels from which a rater evaluates the response of a ratee. These levels describe responses made at a low level (Level 1) of empathic understanding to the highest level (Level 5), a "comprehensive and accurate empathic understanding of his most deep feelings." The Carkhuff scale is as follows:

Empathic Understanding in Interpersonal Processes, III

A Scale for Measurement

Level 1

The verbal and behavioral expressions of the helper either do not attend to or detract significantly from the verbal behavioral expressions of the helpee(s) in that they communicate significantly less of the helpee's feelings and experiences than the helpee has communicated himself.

Example: The helper communicates no awareness of even the most obvious, expressed surface feelings of the second person. The helper may be bored or disinterested or simply operating from a preconceived frame of reference which totally excludes that of the helpee(s).

In summary, the helper does everything but express that he is listening, understanding, or being sensitive to even the most obvious feelings of the helpee in such a way as to detract significantly from the communications of the helpee.

Level 2

While the helper responds to the expressed feelings of the helpee(s), he does so in such a way that he subtracts noticeable affect from the communications of the helpee.

Example: The helper may communicate some awareness of obvious surface feelings of the helpee but his communications drain off a level of the affect and distort the level of meaning. The helper may communicate his own ideas of what may be going on, but these are not congruent with the expressions of the helpee.

In summary, the helper tends to respond to other than what the helpee is expressing or indicating.

Level 3

The expressions of the helper in response to the expressions of the helpee(s) are essentially interchangeable with those of the helpee in that they express essentially the same affect and meaning.

Example: The helper responds with accurate understanding of the surface feelings of the helpee but may not respond to or may misinterpret the deeper feelings.

In summary, the helper is responding so as to neither subtract from nor add to the expressions of the helpee; but he does not respond accurately to how that person really feels beneath the surface feelings, he indicates a willingness and openness to do so. Level 3 constitutes the minimal level of facilitative interpersonal functioning.

Level 4

The responses of the helper add noticeably to the expressions of the helpee(s) in such a way as to express feelings a level deeper than the helpee was able to express himself.

Example: The helper communicates his understanding of the expressions of the helpee at a level deeper than they were expressed, and thus enables the helpee to experience and/or express feelings which he was unable to express previously.

In summary, the helper's responses add deeper feeling and meaning to the expressions of the helpee.

Level 5

The helper's responses add significantly to the feeling and meaning of the expressions of the helpee(s) in such a way as to (1) accurately express feelings levels below what the person himself was able to express or (2) in the event of ongoing deep self-exploration on the helpee's part to be fully with him in his deepest moments.

Example: The helper responds with accuracy to all of the person's deeper as well as surface feelings.

He is 'together' with the helpee or 'tuned in' on his wavelength. The helper and the other person might proceed together to explore previously unexplored areas of human existence.

In summary, the helper is responding with a full awareness of who the other person is and a comprehensive and accurate empathic understanding of his most deep feelings.

The Empathic Process Scale for Verbal Behavior, however, defines the response which could be made at a level of the empathic process. There are six levels of The Empathic Process Scale for Verbal Behavior which correspond level by level to the steps defined in the empathic process (see Chapter II, p.) as defined by this researcher. The Empathic Process Scale for Verbal Behavior is as follows:

Level 1
The verbal expressions of the responder communicate an unwillingness to go beyond the self (to go beyond personal feelings and concerns).
Example: Level one describes a person focused on his own person unable to relate to another person. At this level a person relates all verbal expressions to his own feelings and concerns.

Level 2
The verbal expressions of the responder show a willingness to go beyond the self, to let go of personal feelings and concerns. This level of responding, while going beyond the self, indicates a directive response or one insensitive to the feelings of the other and the self and responding with a directive statement which indicates an analysis of a situation rather than an understanding what it feels like to be in the situation. The responder 'lets go' of feelings and concerns but does not relate them to the situation at this level of responding.
Example: At level two the verbal expressions of the subject reflect a willingness to go beyond the self in thoughts but not in feelings. His responses indicate he has analyzed the situation as it concerns another person, but has not allowed himself to become emotionally involved in responding.

Level 3
The verbal expressions of the responder show a willingness to

'take in,' to allow another to feel at one with one's self. At this level, the responder is responding to the feelings of the other but at a sympathetic, parallel level.

Example: At level three the responder allows the feelings of another person to be part of him. He understands how the other person feels in a situation but does not communicate this in relating to the other person. This is a level of sympathy, of parallel feelings. In this situation, for example, a person could be crying over the loss of another and a sympathizer would cry along with him but never relate to him either through words or gestures an acknowledgment or concern about his pain.

Level 4

The verbal expressions of the responder show that the responder has assumed the 'internal frame of reference' of another and has merged with the other 'as if' they were one.

Example: The verbal expressions at level four indicate that the responder has assumed the 'internal frame of reference' of the other, feels at one with him, and expresses this feeling to the other.

Level 5

The verbal expressions of the responder identify the world as the other perceives the world with no judgment about his external frame of reference, 'as if' playing his role.

Example: At level five, the verbal expressions of the responder identify the world as the other is experiencing it both in feeling and thought with no judgment about his feelings and thoughts, 'as if' playing his role.

Level 6

The verbal expressions of the responder show he understands reality in the being of another. His response is related to another 'as if' he were the other person perceiving the same realities. At this level, a response of empathic understanding is made.

Example: Level six is the level at which a responder relates his emotional and thoughtful understanding to another. In relating this understanding, he offers comfort or assistance. At this level a feeling of altruism is part of the response.

Like the Carkhuff scale, the levels of The Empathic Process Scale for Verbal Behavior progress from a minimum level of empathic responding

to a maximum level of empathic responding. The Empathic Process Scale for Verbal Behavior defines degrees of empathic responding beginning at a level of self-centeredness (Level 1) and progressing through levels of response which increasingly go beyond the self to the final level six, at which a response of selfless and altruistic concern for another person is expressed.

As can be seen, The Empathic Process Scale for Verbal Behavior operationalizes each level of the process. Thus, an examination of the two scales illustrates how the Carkhuff scale, while appropriate for evaluating a counselor's empathic understanding in the counseling relationship, is an unsatisfactory measure of all of the components of the operationalized definition stated by this researcher.

It would also be inappropriate to use a scale which elicits an empathy score based upon questions requiring the subject to project himself into intellectually contrived situations and then be required to answer what he would do if he were in that contrived situation, as in the Dymond Test (1949). The nature of this study is dependent upon an immediate response and defines empathy in terms of a process rather than in global terms of warmth, positive regard, and so on as found in the other studies (Carkhuff, 1968; Rogers, Gendlin, Kiesler & Truax, 1967; Truax & Carkhuff, 1967). Therefore, the instrument used in this study was constructed especially for use with teachers and to identify the degree to which an individual has arrived at an empathic state as measured by his verbal response relating to the affective qualities as described in each step of the empathic process.

Three naive judges were given an Instruction Sheet for the rating procedure. In addition the judges were given a copy of The Empathic Process Scale for Verbal Behavior, and an accompanying explanation and elaboration of each level in terms of verbal responses (Appendix B). Each judge was given instruction in how to rate the responses.

To establish inter-judge reliability, the judges were initially given ten Response Forms to rate from the same population as in the present experiment. Once this was established, the judges were then given all the forms to score.

An inter-judge reliability analysis of variance technique was employed to determine the reliability of the three raters (Winer, 1962, pp. 124-131). The assumptions underlying this formula are that the

> "error of measurement is uncorrelated with the true score, that the sample of n people on whom the observations are made is a random sample from the population to which inferences are to be made, that the sample of k measuring instruments used is a random sample from a population of comparable instruments, and that the within-person variance may be pooled to provide an estimate of the population variance" (Winer, p. 127).

The inter-judge reliability analysis is presented in Table II.

TABLE II

ANALYSIS OF VARIANCE SUMMARY TABLE FOR INTER-JUDGE RELIABILITY

Source	SS	df	MS	F
Between ratees	38.13	9	4.23	
Within ratees	16.67	20	.83	$\frac{.70}{.84} = .83$
Judges	1.40	2	.70	
Judges by ratees	15.27	18	.84	
TOTAL	54.80	29		

The data from which Table II was derived can be found in Appendix C.

The three raters (sufficient for an inter-judge reliability coefficient--Ebel, 1951) were consistently able to differentiate very well ($r = .81$) the steps of the empathic process as defined with minimal instruction. It is also important to note one further evidence of no significant difference between the judgments of the raters. The F ratio of .83 of the judge MS over the MS judge by ratee term was found not to be significant at $F_{.95}(2,18) = 19.4$.

In total, five raters were trained and two were eliminated, not because of misunderstanding the differentiations of the scale but because both tended to rate consistently in a pattern. One rated everyone either a two or a three. The other rated everyone at the extremes of the scale. The latter rater judged every written response in terms of being either a response of personal involvement at one extreme or a response of full empathic understanding at the other extreme.

The comments of two of the raters indicated that they felt many people responded from a textbook orientation rather than from personal perceptions of the situation observed. This observation by these two raters raises questions about the adequacy of the normal textbook and lecture approaches to teaching teachers how to respond to children.

To determine if there were significant differences between judges, an F test was made from the ratio of MS judges and MS judges by ratees. The calculation was as follows:

$$F = \frac{\text{MS judges}}{\text{MS judges x ratees}} = \frac{.70}{.84} = .83$$

An $F_{.95}(2,18) = 19.4$ is greater than the observed F = .83; therefore no significant judge effect exists. Thus either the MS_{within} or $MS_{judges \times ratees}$ term would be acceptable as the numerator in the inter-judge reliability coefficient in that the MS_{within} term includes the error MS term for judges, of which this test indicates that there is no significant effect. To avoid whatever, though slight, judge effect there is, it is better to use the $MS_{judges \times ratees}$ term in the numerator.

The inter-judge reliability was determined by using the following formula, where r = reliability of the average of (k) measurements; $MS_{j \cdot r}$ = the interaction representing the judges across ratees; and $MS_{between}$ = the average variance between measures:

$$r = 1 - \frac{MS_{j \cdot r}}{MS_{between}}$$

The inter-judge reliability computations were as follows:

$$r = 1 - \frac{.84}{4.23} = .81$$

In addition, a correlation ratio was calculated to determine the internal consistency of The Empathic Process Scale for Verbal Behavior. The ratio used was:

$$r = \frac{MS_{between}}{MS_{between} + MS_{w} + MS_{j}}$$

$$= \frac{4.23}{4.23 \quad .83 \quad .70}$$

$$= .73$$

The internal consistency of r = .73 means that 53% (r^2) of the variance in measurement can be systematically explained (accounted for).

Treatment Effect

The null hypothesis for the main effect is as follows: Subjects in the aesthetic-religious condition will respond at the same level on The Empathic Process Scale for Verbal Behavior as those subjects in the didactic-content condition, in the combined condition, and in the control condition.

An $F_{obs.}$ of 2.25 is greater than $F_{.90}(3.56) = 2.18$; therefore a significant overall treatment effect was found. The analysis of variance procedure for this treatment effect can be seen in Table III.

TABLE III

ANALYSIS OF VARIANCE SUMMARY TABLE FOR MAIN TREATMENT EFFECT

Source	SS	df	F
Between Methods	60.58	3	2.25[1]
Error	502.28	56	
TOTAL	562.86	59	

[1] $F_{obs.} > 2.18$

The data and calculations from which Table III was derived may be found in Appendix C.

A single-factor analysis of variance procedure was used to treat

the data and a significant treatment effect was found ($p < .10$). An alpha of .10 was accepted as a level of significance because of the uniqueness of this study. Empathy has never been systematically defined in terms of a process prior to this study. It was of interest to detect even the slightest effect of manipulating empathic responding in the treatment conditions.

The significant overall treatment effect then permitted a testing of the first and second hypothesis calling for a test of differences between treatment means.

The first hypothesis stated: Subjects involved in an aesthetic-religious experience will respond significantly more often at a higher level on The Empathic Process Scale for Verbal Behavior than subjects in a didactic-content condition or in a condition combining the two experiences.

A t-test of differences between the treatment means for the aesthetic-religious condition and didactic-content condition was made.

The statistical hypothesis for testing the differences between the means of these two conditions is stated in a way using the null form of the hypothesis:

H_1: $m_{A-R} = m_{D-C}$

H_2: $m_{A-R} \neq m_{D-C}$

$\alpha = .05$

Decision Rule: Reject H_1 if $t_{obs.}(28) \begin{cases} < -1.70 \\ > 1.70 \end{cases}$

The formula used for testing this hypothesis is:

$$t^2 = \frac{(n_{A-R} + n_{D-C} - 2)(n_{D-C}\Sigma X_{A-R} - n_{A-R}\Sigma X_{D-C})^2}{(n_{A-R} + n_{D-C})(n_{D-C}L_{A-R} + n_{A-R}L_{D-C})}$$

where $L_{A-R} = n_{A-R}\Sigma X^2_{A-R} - (\Sigma X_{A-R})^2$

and $L_{D-C} = n_{D-C}\Sigma X^2_{D-C} - (\Sigma X_{D-C})^2$

$$t^2 = \frac{(28)(260100)}{(30)(74400)} = -3.26$$

$$t = \sqrt{3.26} = -1.80^*$$

The decision is to reject H_1 as $t_{obs.}$ of -1.80 is less than $t_{.95}(28) = -1.70$. Thus the first hypothesis as stated must be rejected as the negative sign indicates that the didactic-content method was significantly more effective as a means of eliciting empathic understanding responses than was the aesthetic-religious method, as measured by The Empathic Process Scale for Verbal Behavior. A discussion of this unanticipated result will be presented later.

The second hypothesis stated: Subjects having the didactic-content treatment will respond significantly more often at a higher level on The Empathic Process Scale for Verbal Behavior than subjects having the combined condition.

The statistical hypothesis for testing the differences between the means of these two conditions is stated in the null hypothesis form:

H_1: $m_{D-C} = m_{cmb}$

H_2: $m_{D-C} \neq m_{cmb}$

$\alpha = .05$

Decision Rule: Reject H_1 if $t_{obs.}(28) \begin{cases} < -1.70 \\ > 1.70 \end{cases}$

$$t^2 = \frac{(28)(65025)}{(30)(72300)}$$

$t^2 = .83$

$t = .91$

Do not reject H_1 as $t_{obs.}$ is less than 1.70. Thus the observed t-test difference between the means of the didactic-content and the combined condition showed no significant difference.

No further t-tests were made between treatment means because of the loss of power associated with repeated t measures.

In addition to this series of t-tests, one other test was made: the Duncan Multiple Range Test for all ordered pairs of treatment means. The Duncan procedure uses a protection level of α for the collection of tests, rather than an α level for the individual tests. There were no significant differences found between any pair of the treatment means at .10 level. The results appear in Table IV.

TABLE IV

DUNCAN MULTIPLE RANGE TEST ON DIFFERENCES BETWEEN ALL PAIRS OF ORDERED MEANS

Treatments[1]		4	1	3	2
	Means	7.00	7.26	8.40	9.53
	7.00	----	.26	1.40	2.53
	7.26		----	1.14	2.27
	8.40			----	1.13
	9.53				----
			r = 2	r = 3	r = 4
	q.90(r,56)		2.363	2.497	2.584
	q.90(r,56)(11.59)		27.35	28.86	29.90

[1] 4 = Control
1 = Aesthetic-Religious
3 = Combined
2 = Didactic-Content

CHAPTER V

DISCUSSION

Finding significant results at any level is a thrilling experience for anyone conducting research, but having one's significant results come from an unexpected treatment condition is even more thrilling. Such results bring new insights, suggest different relationships than once supposed, and provide many new directions for further study of the variable under examination. Discussing the findings of this study, then, will require more than simply giving concluding remarks to what has been done. The insights and questions which have arisen out of the results of these efforts is the beginning of a new adventure in studying the nature and effect of empathy in learning and teaching.

General Summary of Results

A significant F test for main treatment effect warranted an examination of differences between treatments to find the treatments most effective in assisting people in arriving at an empathic state. The t-tests of differences between treatment means showed that the didactic-content method was the most effective method of preparing people to respond empathically as defined and measured by The Empathic Process Scale for Verbal Behavior. A Duncan Multiple-Range Test of differences between all possible pairs of means showed no significant relationship existing between any pair of treatment means.

An inter-judge reliability coefficient of .81 indicates an

acceptable level of reliability. The ratings of the three judges can be explained in terms of the variance, which is systematically accounted for by the judges' measuring from the same reference point. In this case 35% of the variance is not systematically accountable.

Main Effect

The overall main effect was significant at the .10 level of significance. An alpha of .10 was selected as an acceptable level for accepting significance because of the uniqueness of the conceptualization of the study and the use of an instrument which has not had reliability and validity measures yet made on it. The instrument was designed for this study, the nature of which is unique in research in empathy. It was intended that this study, while designed to assist prospective teachers to arrive at an empathic state, define empathy in terms of a process, ordered and sequential, so that a clearer understanding of what empathy is could be gleaned. A basic assumption underlying the study was that once at an empathic state of being, the level at which one can empathize would be revealed. It was also assumed that the more empathic the subject was the more capable she was of responding at a higher level. Inherent in these assumptions are positions on the nature of empathy as to whether it is learned or a constant in the human affective system.

While the research literature strongly indicates that empathic responding is indeed learned, this study was also raising this question. As the aesthetic-religious group received no hint as to what was expected of them in terms of response, there was not an opportunity for them

to learn a new response during the treatment condition.

Subjects in the didactic-content condition appeared to use information about the empathic process to assist them in arriving at an empathic state of being. The results indicate that this group of subjects responded more empathically than subjects in the aesthetic-religious or the combined condition. What could have happened was that the information about the process could have directed their verbal responses in relation to the "critical incident." It was originally assumed that the verbal instruction would not assist the prospective teachers in arriving at a state of being in which they could respond empathically--that "words would not be enough." Empathy had never been systematically defined in a study before and it was of interest to find out whether or not the slightest effect of treatment of manipulating empathic responding could be detected. An alpha of .10 was therefore accepted as a level of significance in treatment effecting the variable.

While a significant overall effect was found at .10 and a significant treatment effect was found with the didactic-content method at .05 in t-tests between the means of the didactic-content and aesthetic-religious methods, there is reservation in making anything but a conservative interpretation of significance, partially because of the results of the Duncan Multiple-Range Test and partially because of the need to further test the reliability and validity of The Empathic Process Scale for Verbal Behavior. Had the main effect been significant at .05 or .01 this may have effected a different result in terms of the Duncan Multiple-Range Test. Only a replication of the study can answer this.

Treatment Effects

T-tests on differences between the means of the aesthetic-religious and the didactic-content treatments, and between the didactic-content and the combined conditions, were made.

The first hypothesis stated: Subjects involved in an aesthetic-religious experience will respond significantly more often at a higher level on The Empathic Process Scale for Verbal Behavior than subjects in a didactic-content condition or in a condition combining the two experiences.

The results of the t-test showed negative significant results. In other words, the test results show that subjects in the didactic-content method responded significantly more often at a higher level on The Empathic Process Scale for Verbal Behavior than subjects in the aesthetic-religious condition.

The aesthetic-religious condition was designed to assist the subjects in arriving at an empathic state so that they could respond with empathic understanding. It was found, however, that they responded with significantly less empathic understanding than the didactic-content subjects. One assumes they were either not at an empathic state or that if they were they did not respond on The Empathic Process Scale for Verbal Behavior in a way that indicated this. It may also be that the subjects perceived the instructions as a cognitive task that required a response to content, or that they perceived their tape-slide experience as irrelevant to their responding to the eight-millimeter film.

The results of this test showed that the treatment condition (didactic-content) in which empathy was explained as a process clearly

indicates that defining the process assisted people in relating verbally at a higher level of empathic understanding. Inherent in the meaning of these results is the importance of being able to differentiate one feeling from another feeling and feelings from events, thereby providing a basis for effectively responding to the thoughts and feelings of another person. The results of this t-test between the means of these two groups show that being able to go beyond the self into the beauty and inspiration of the world of nature and the words from religious scriptures is not enough to be able to respond with empathic understanding at a high level as defined by the scale in this study. While the aesthetic-religious condition may take people beyond themselves (a prerequisite to taking in another), it is further necessary to know how to respond to another with empathic understanding. Defining the empathic process provided by the didactic-content method is needed for differentiating and integrating events and feelings. It appears that people need to know how and what they are feeling and at what level they are responding. If they desire to respond empathically an awareness of the process then provides them the information for making decisions to respond at a higher level of empathic understanding.

In the didactic-content group it is assumed that those able to respond empathically on The Empathic Process Scale for Verbal Behavior had arrived at an empathic state of being. There is reasonable question, however, as to whether this in fact did occur. What could have been measured was the subject's cognitive understanding of the empathic process, a process they had verbally learned to differentiate and were

ultimately asked to express in words. The presentation was on tape and was played to the subjects who were seated in padded comfortable chairs, in a semi-darkened room, who had listened to soft music before hearing the taped instruction. These prerequisite conditions existed in both treatment settings and may have been adequate to assist the subjects in moving into a receptive and open state of being. If this were true, then the experience in the aesthetic-religious condition would have only served to heighten their receptivity and openness. Learning about the empathic process in any didactic way did not occur in the aesthetic-religious condition. This may have accounted for the insignificant results of the treatment. People received a more verbal experience after which they were asked to make a verbal response.

The responses from the aesthetic-religious condition indicated annoyance with the "God talk" on the one hand to being "beautiful and inspirational" on the other. In general, some agitation was observed among subjects in this condition and this may have been expressed more often in terms of self on the response sheets. Agitation was expressed in other groups also, but more was expressed in this group. The agitation in all cases may have been due to having feelings aroused and not knowing how to express them in relation to the "critical incident." In any event, a response concerned with one's own feelings of agitation or frustration would receive a rating at level one or two, and thereby lower the total effect of the treatment.

In any event, there is reason to drastically change our preparation of teachers if when faced with heightened levels of awareness or openness they begin functioning at level one or two.

The second hypothesis stated: Subjects in the didactic-content condition will respond significantly more often at a higher level on The Empathic Process Scale for Verbal Behavior than subjects in the combined condition.

The results of this test show that there are no significant differences between these two conditions.

The rationale underlying this hypothesis was that the combined condition subjects would experience "too much" stimulation and their ability to respond empathically would be stifled because of it. This may have happened to a degree, but it appears that the didactic-content method affected the condition to the extent of making the combined condition equal to it. The didactic-content method was found to be a significant treatment condition when compared with the aesthetic-religious. The combined condition, however, never showed a significant difference in relation to the didactic-content condition. The mean of the scores of those exposed to the combined condition was closer to the didactic-content mean, which may have contributed to the overall significant treatment effect. Since the combined condition included the significant treatment method, it can be assumed that there was some degree of effectiveness in this condition which kept it "equal" to the significant condition.

Instrument and Raters

The steps of the empathic process as defined and delineated by The Empathic Process Scale for Verbal Behavior appeared to be understood by the raters in that 65% of the time the raters' scores correlated consistently with each other. This high correlation coefficient indicated

that the raters were judging from the same reference point 65% of the time. This reference point was The Empathic Process Scale for Verbal Behavior. There is reason, then, to further investigate the instrument as a valid and reliable measure of empathic understanding.

The instrument could be strengthened in validity by its utilization in situations where the total response of the individual could be observed. To do so would require minimal adaptations of the definition at each level to include such factors as face expression, vocal quality, body posture, and so on.

The results of this study may have been different had the post-measure been given after a period of time had elapsed. The immediate testing of the effect did not allow for an opportunity for the treatment to be internalized over time. This internalization of the treatment may have taken place over time and a measure taken after a period of two weeks might have illustrated this.

Another factor which may have confounded the results of this study is the ability to express feelings verbally. Some subjects, for example, may have been able to demonstrate behaviorally what they could not express verbally. A subject observed putting her arms around a child would demonstrate a level of empathic responding which she might not verbally be able to express.

It became apparent after the study was completed that a questionnaire should have been given asking the subjects questions such as: "What do you think this study is about? Did you feel it was 'real'? Did you feel that the children in the film were 'coached'?" The answers

to such questions would have shown whether the subject's perceptions were the same as the experimenter's perceptions. This information would give the study validity.

Further Experimentation

From this study three basic approaches to further study may be suggested. First, studies validating the instrument need to be performed. Presently the scale is limited to observations of verbal behavior, but could easily be adapted to the measurement of other behaviors such as the tone of the voice, facial expressions and so on. Cross-validation studies of the instrument used in different observational settings would insure that the instrument is measuring the empathic process and could measure this process independent of the observational technique used in any research.

The second avenue for study is to determine whether empathic responding could be taught systematically as defined by the process. In addition to the consideration of teaching the process arises a question of finding optimal methods for maximizing learning. One interesting approach might be to study the development of empathic responding in a setting where it is modeled as opposed to a setting where it is systematically "instructed" by means of lecture or through some other medium.

In addition, it would also be of interest to study the effect of individual sensory input mechanisms on assisting people to arrive at a state of receptivity and openness. Measurement for this study could be made on The Empathic Process Scale for Verbal Behavior and modifications

could be made to the scale for measuring a specific sensory input. The subjects for such a study would be those who are observed over time to respond at levels five and six of The Empathic Process Scale for Verbal Behavior. The purpose in using these subjects would be to isolate the sensory data. This idea evolved as a result of questioning the effect of a variety of stimuli that were used in the aesthetic-religious condition. In this condition the combination of music, photos, thoughts on the onenesses in the universe may have overloaded the sensory circuits for some people. Also of interest would be to examine the effect of different types of music, or photographic scenes, or "words of wisdom" that effect the empathic state of being of certain personality types as measured by an instrument such as the Thematic Aperception Test.

A third approach to the study of empathy would be to determine the relationship between being at an empathic state of being and one's ability to respond empathically. The ability to respond empathically is the factor which has been identified by Rogers (1951) and May (1967) as critical to facilitating learning. If this study could be replicated with the exception of changing the observation of verbal behavior to an observation of a behavioral response made to a child, the results might be quite different. The behavioral response to the child may be non-verbal but demonstrating a full empathic understanding. The results of this study raise this issue. The aesthetic-religious subjects may well have been at a more open, receptive state of being, going much beyond themselves in terms of relating and yet not have known how to

respond verbally. If empathic responding is learned sequentially, then feeling "at one with another" may be useless in a relationship because of not knowing how to respond to what one is feeling.

It appears that empathic responding at as high a level as six as defined on The Empathic Process Scale for Verbal Behavior requires the integration of knowledge and feelings which are reciprocally differentiated by the responder. It would be of interest to observe these processes in people who are consistent in their functioning at this level, for therein may lie the key to understanding most efficiently the integrating and differentiating processes inherent in the empathic process.

Concluding Remarks

This study was conceptualized and designed with the education of teachers as the purpose for examining the empathic process.

Some insights have evolved concerning effective ways of learning how to arrive at an empathic state and how to respond with empathic understanding. Curiosity for further study has been aroused from examining the theoretical basis and results of this study.

It is the author's hope that whatever may come from this study in terms of further experimentation, those reading this study will also become very concerned about the education of teachers and that that concern will be translated into action for reform in teacher education.

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A P P E N D I X A

FORMS FOR SUBJECTS

1) Personal Experience Questionnaire
   Working with Children

2) Instruction Sheets

   Aesthetic-Religious Condition
   Didactic-Content Condition
   Combined Condition
   Control Condition

3) Critical Incident Form

PERSONAL EXPERIENCE QUESTIONNAIRE WORKING WITH CHILDREN

NAME_____AGE_____SEX_____

MARITAL STATUS_____CHILDREN____HOW MANY_____

TEACHING EXPERIENCES (Please list)_____

_____

_____

EXPERIENCES WITH CHILDREN (Please state the ages of the children)
If you have never worked with children, tell what you would like an opportunity to try in working with children.

_____

_____

_____

WHAT IS YOUR PRESENT MAJOR AREA OF STUDY_____

DO YOU PLAN TO CHANGE YOUR MAJOR AREA OF STUDY_____WHEN_____WHY_

_____

_____

WHAT AGE CHILD DO YOU THINK YOU WOULD MOST LIKE BEING WITH_____

DO YOU PLAN TO TEACH_____AT WHAT LEVEL_____(GRADE)_____

HAVE YOU EVER BEEN IN A COLLEGE PROGRAM OTHER THAN CHILD DEVELOPMENT____

WHAT WAS YOUR MAJOR_____WHAT COLLEGE DID YOU ATTEND_____

AESTHETIC-RELIGIOUS CONDITION

INSTRUCTION SHEET

Tuesday, April 11, 1972 (1:00)

Please refrain from talking. Have a seat and find a comfortable position in any chair of your choice. Close your eyes until the music stops and a slide-tape presentation begins. After the slide-tape presentation, please remain silent with your eyes closed until an eight-millimeter film projection begins. After the film projection, remain silent with your eyes closed until you are given a pencil and paper instructing you what to do. Please remain seated until your pencil and paper have been collected from you.

DIDACTIC-CONTENT CONDITION

INSTRUCTION SHEET

Tuesday, April 11, 1972 (1:45)

Please refrain from talking. Be seated in a comfortable position and close your eyes. You will hear a tape-recorded message after which you will view a short film. Please refrain from talking throughout the period of time here. Following the film, you will be given a pencil and a paper instructing you what to do. Please remain seated until your pencil and paper are collected from you.

COMBINED CONDITION

INSTRUCTION SHEET

Thursday, April 13, 1972 (1:00)

Please refrain from talking. Be seated in a comfortable position and close your eyes until the music stops and the slide-tape presentation begins. Please refrain from talking during the entire period of time you are here. After the presentation, a pencil and paper instructing you what to do will be given you. Please remain seated until the pencil and paper are collected from you.

CONTROL CONDITION

INSTRUCTION SHEET

Thursday, April 13, 1972 (2:15)

Please refrain from talking until you leave the room. You will view a short film after which you will be given a pencil and a paper instructing you as to what to do. Please remain seated until your pencil and paper have been collected.

CRITICAL INCIDENT FORM

You are a teacher in this situation. How would you respond?

APPENDIX B

MEASUREMENT

1) Critical Incident

2) The Empathic Process Scale for Verbal Behavior

3) Directions for Raters

4) Examples of Levels on The Empathic Process Scale for Verbal Behavior

CRITICAL INCIDENT

Two preschool girls, ages 3 and 4, are filmed on an eight-millimeter film as they play with a doll, a doll carriage, and a blanket, the comforting blanket of one of the girls. The girls are viewed fixing the doll in the carriage and taking turns pushing the carriage.

The girls are then seen pulling and tugging the blanket. The bigger child is trying to take the blanket from the smaller child.

The length of the incident is about one and one-half minutes.

THE EMPATHIC PROCESS SCALE FOR VERBAL BEHAVIOR[1]

Level 1. The verbal expressions of the responder communicate an unwillingness to go beyond the self (to go beyond personal feelings and concerns).

Level 2. The verbal expressions of the responder show a willingness to go beyond the self, to let go of personal feelings and concerns. This level of responding, while going beyond the self, indicates a directive response or one insensitive to the feelings of the other and the self and responding with a directive statement which indicates an analysis of a situation rather than an understanding of what it feels like to be in the situation. The responder "lets go" of feelings and concerns but does not relate them to the situation at this level of responding.

Level 3. The verbal expressions of the responder show a willingness to "take in," to allow another to feel at one with one's self. At this level, the responder is responding to the feelings of the other but at a sympathetic, parallel level.

Level 4. The verbal expressions of the responder show that the responder has assumed the "internal frame of reference" of another and has merged with the other "as if" they were one.

---

[1] Every step in this scale represents the steps one goes through to ultimately respond with full empathic understanding. A response made at each level represents the level at which one is able to respond empathically.

Level 5. The verbal expressions of the responder identify the world as the other perceives the world with no judgment about his external frame of reference, "as if" playing his role.

Level 6. The verbal expressions of the responder show he understands reality in the being of another. His response is related to another "as if" he were the other person perceiving the same realities. At this level, a response of empathic understanding is made.

DIRECTIONS FOR RATERS

Please attempt to disregard any ideas you may have gained through previous training or experience concerning the empathic behavior of teachers in a teaching situation and concentrate only on the descriptions of teacher behavior presented in each of the six levels of The Empathic Process Scale for Verbal Behavior.

Study the scale using the samples of typescript which exemplify teacher behavior described at each level.[1]

Procedures for rating:

1. Familiarize yourself with the six levels of The Empathic Process Scale for Verbal Behavior.

2. Read an entire response paying particular attention to how the response makes you feel in relation to the film.

3. Select the highest level at which you feel the responder is relating. (It is assumed that one who can relate at level 5, for example, has gone through the process involved in steps 1, 2, 3, and 4.)

4. Read each response only once and use your first judgment of at which level the response is being made.

5. Mark your rating: 1, 2, 3, 4, 5, or 6 on a Tally sheet next to the corresponding # found on the Response Form.

6. Your first packet will contain practice responses. Please follow the procedure outlined here to do the rating. Please return these rated responses to me by May 16, 1972 for further directions.

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[1] The format of this Directions for Raters sheet is taken from: Blane, S. M. Immediate effects of supervisory experience on counselor candidates. Gainesville, Fla.: University of Florida, 1967, p. 73.

EXAMPLES OF LEVELS ON
THE EMPATHIC PROCESS SCALE FOR VERBAL BEHAVIOR

Level 1. Level one of this measure describes a person focused on his own person unable to relate to himself. At this level a person relates all verbal expressions to his own feelings and concerns.

Example: "I think this is stupid." (The verbal response expresses the personal feelings of the responder and is unrelated to the critical incident to which a response is required.) No feeling in relating.

Level 2. At level two the verbal expressions of the subject reflect a willingness to go beyond the self in thoughts but not in feelings. His responses indicate he has analyzed the situation as it concerns another person, but has not allowed himself to become emotionally involved in responding.

Example: "He injured his arm," or "You injured your arm." (This is the analyst who never feels anything--doesn't even care about listening.) No feeling in relating.

Level 3. At level three the responder allows the feelings of another person to be part of him. He understands how the other person feels in a situation but does not communicate this in relating to the other person. This is a level of sympathy, of parallel feelings. In this situation, for example, a person could be

crying over the loss of another and a sympathizer would cry along with him but never relate to him either through words or gestures an acknowledgment or concern about his pain. Example: "Your arm must be hurting." (Here, there is a willingness to go beyond analyzing, and a willingness to listen.) Begins to feel in relating.

Level 4. The verbal expressions at level four indicate that the responder has assumed the "internal frame of reference" of the other, feels at one with him, and expresses this feeling to the other.

Example: "Oh, I'm so sorry your arm is hurting." (Person listens and takes it in--assumes it.) Parallel feelings with another. Sympathy.

Level 5. At level five, the verbal expressions of the responder identify the world as the other is experiencing it both in feeling and thought with no judgment about his feelings and thoughts "as if" playing his role.

Example: "The pain is excruciating!" (The listener uses adjectives to describe what the other person is feeling.) Relates to the feelings of the other.

Level 6. Level six is the level at which a responder relates his emotional and thoughtful understanding to another. In relating this understanding, he offers comfort or assistance. At this level a feeling of altruism is part of the response.

Example: "The pain is agonizing--lie down! Take this aspirin and let me hold the weight of your arm." (A feeling of concern and closeness of feelings for the other person will come through. Carl Rogers is an example of a person who, when he writes, you feel what he's saying.) Altruism.

Remember: Knowledge and feelings are two different things.

A P P E N D I X C

CALCULATIONS

1) Inter-Judge Reliability Calculations

2) Test for Significant Differences Between Judges

3) Calculations for Main Treatment Effect

4) Test for Main Treatment Effect

INTER-JUDGE RELIABILITY CALCULATIONS

Numerical Values				
Person	Judge 1	Judge 2	Judge 3	Total
1	3	3	3	9
2	2	2	2	6
3	3	4	6	13
4	2	2	2	6
5	3	4	3	10
6	1	2	2	5
7	4	6	6	16
8	4	2	2	8
9	4	6	3	13
10	3	3	4	10
Total:	$T_1=29$	$T_2=34$	$T_3=33$	G=96

$$(1) = \frac{G^2}{kn} = 307.20 \qquad (2) = \Sigma(\Sigma t^2) = 362.$$

$$(3) = \frac{T^2}{n} = 308.60 \qquad (4) = \frac{\Sigma p^2}{k} = 345.33$$

k = Judges n = Subjects

SS between people = (4)-(1) = 345.33 - 307.20 = 38.13

SS within people = (2)-(4) = 362. - 345.33 = 16.67

SS between judges = (3)-(1) = 308.60 - 307.20 = 1.40

SS residual = (2)-(3)-(4)-(1) = 362. - 308.60 - 345.33 - 307.20 = 15.27

TEST FOR SIGNIFICANT DIFFERENCES BETWEEN JUDGES

To determine if there were significant differences between judges an F test was made from the ratio of MS_{judges} and $MS_{judges \times ratees}$. The hypothesis for this test is:

H_1: $\sigma^2 = 0$

H_2: $\sigma^2 \neq 0$

$\alpha = .05$

Decision Rule: Reject H_1 when $F_{obs.} > F_{.95}(2,18) = 19.4$.

The calculations are as follows:

$$\frac{MS_{judges}}{MS_{judges \times ratees}} = \frac{.70}{.84} = .83$$

Accept H_1 as $F_{obs.} = .83$ is less than $F_{.95}(2,18) = 19.4$. Therefore, there is no significant judge effect and either the MS_w or $MS_{j \cdot r}$ term would be acceptable as the numerator in the inter-judge reliability coefficient. To avoid whatever, though slight, judge effect there is, it is better to use the $MS_{j \cdot r}$ term in the numerator as the MS_w term includes both the judge effect and the judge-by-ratees effect.

CALCULATIONS FOR MAIN TREATMENT EFFECT

Treatment Conditions			
Aesthetic	Didactic	Aesthetic-Didactic	Control
3	8	6	7
8	8	6	9
3	17	12	13
9	11	13	7
8	5	7	7
8	8	9	5
5	8	12	4
7	6	5	6
9	12	9	6
8	5	5	10
8	10	5	6
7	4	10	8
13	14	9	6
3	11	9	6
10	16	9	5
$T_1=109$	$T_2=143$	$T_3=126$	$T_4=105$
$\Sigma X_1^2=901$	$\Sigma X_2^2=1585$	$\Sigma X_3^2=1158$	$\Sigma X_4^2=807$
$SS_1=\Sigma X_1^2-\frac{T_1^2}{n}$	$SS_2=\Sigma X_2^2-\frac{T_2^2}{n}$	$SS_3=\Sigma X_3^2-\frac{T_3^2}{n}$	$SS_4=\Sigma X_4^2-\frac{T_4^2}{n}$
$=901-792.06$	$=1585-1363.26$	$=1158-1058.40$	$=807-735$
$=108.94$	$=221.74$	$=99.60$	$=72.00$
$\bar{T}_1=7.26$	$\bar{T}_2=9.53$	$\bar{T}_3=8.40$	$\bar{T}_4=7.00$
$SS_w=SS_j=502.28$			

The symbol T_1 is an abbreviation for the more complete notation given by: $T=X_{i1}$

$SS_{methods} = 3948.73 - 3888.15 = 60.58$

$SS_{error} = 4451.00 - 3948.73 = 502.28$

$SS_{total} = 4451.00 - 3888.15 = 562.85$

$df_{methods} = k-1$

$df_{error} = kn-k$

$df_{total} = kn-1$

Computational symbols:

(1) $= G^2/kn$

(2) $= \Sigma(\Sigma X_1^2)$

(3) $= (T_j^2)/n$

Sums of squares in terms of computational symbols:

$SS_{methods} = (3) - (1)$

$SS_{error} = (2) - (3)$

$SS_{total} = (2) - (1)$

TEST FOR MAIN TREATMENT EFFECT

The hypothesis for the main effect is:

$$H_1: \quad m_1 = m_2 = m_3 = m_4$$

$$H_2: \quad m_1 \neq m_2 \neq m_3 \neq m_4$$

$$\alpha = .10$$

Decision Rule: Reject H_1 when $F_{obs.} > F_{.90}(3,56) = 2.18$

Analysis of Variance Summary for Main Treatment Effect

	SS	df	F
Between Methods	60.58	3	2.25^1
Error	502.28	56	
TOTAL	562.86	59	

[1] $F_{obs.} > 2.18$; therefore, reject H_1.

The significant overall treatment effect then permitted a testing of the first and second hypotheses calling for a test of differences between treatment means.

A P P E N D I X D

INSTRUCTIONAL CONDITIONS

1) Aesthetic-Religious

2) Didactic-Content

3) Combined

4) Control

AESTHETIC-RELIGIOUS CONDITION INSTRUCTION

After the three to five minute soft music presentation, a 67-slide presentation began. The first slide was of the Universe. The next few slides presented various scenes of the Earth's surface: mountains, sea, forests, plains. The next series of slides showed specific elements within the greater world surfaces: flowers, butterflies, birds, animals of the forest. The last series of slides showed the family of man. The faces of children of different races were shown individually: Chinese, Black, Indian, White. Then children of different races were shown playing together. The slide presentation ended with a viewing of the scene of the ocean.

The orchestration accompanying this slide presentation was Aaron Copland's "Fanfare for the Common Man" and "Appalachian Spring," and Symphony No. 5, Fourth Movement, by Gustav Mahler.

The inspiring words accompanying the slides were taken from the writings of Baha'u'llah and included the following sources: The Hidden Words of Baha'u'llah and Baha'i Prayers.

This presentation was made by Stephen Waite, Human Potential Center, School of Education, University of Massachusetts at Amherst, 1970.

DIDACTIC-CONTENT CONDITION INSTRUCTION

After the three to five minute soft music presentation, the instruction began. The following is the text of the instruction for this condition:

Carl Rogers and Rollo May have identified empathy as a key process in effecting change in the counseling relationship. Empathy combined with love is an essential combination for a client to learn how to relate to himself and to others. In a perceptual context, relating one's self to his world is prerequisite to learning. Thus, experience from the clinical setting has underscored the importance of empathy in learning.

There is reason then to consider the empathic quality a necessary characteristic of the classroom teacher. Rollo May believes the empathic involvement of the teacher facilitates learning in the classroom as it does in the clinical setting. He states:

> "Significant teaching requires empathy, for only then does the professor's mind meet the student's in a fructifying intellectual experience. The teacher without empathy is like a motor car with the gears unmeshed--the motor races, making noise as ineffectual as 'sounding brass and a clanging cymbal.' Knowledge may go from mind to mind through relatively impersonal means; but we should all admit the more significant kind of knowledge is that in which there is a mutual participation, a partial identification of the minds of teacher and student. Then truth is made a living force passed from one to another, and education becomes truly a 'leading out' of the highest creative potentialities of the student's mind through inspiring contact and participation in the creative actualities of the teacher's mind."

If empathy is so fundamental a process in the "leading out of the

highest creative potentialities of the mind," every teacher ought to be able both to empathize and to understand the nature of the process in the developing child. A process so fundamental to releasing human potential must be understood by every truly educated person if he is always to maximize his competence to learn from every life experience. This latter is no longer a choice but a necessity for living in our age--an age that Alvin Toffler calls the "super industrial revolution." The products and changes are occurring so rapidly during this time that the multiple stimulation "overloads the human organism's physical adaptive systems and its decision-making processes." Learning competence is required for everyone to at least cope with present living, to say the least of developing toward self-actualization.

Empathy has been studied as a variable in relation to other variables. In most cases researchers formulate a limited definition of empathy and that usually is in terms of characteristics unique to their research. Thus conclusions as to the nature of empathy and its effective role in communication cannot be reliably determined on the basis of past research.

Be that as it may, teachers cannot wait for researchers to define empathy in an all-inclusive way before they must be concerned with it. For them a decision must be made involving the use of what knowledge there is. And so, from the existing research and theoretical literature some direction can be gleaned in arriving at tentative conclusions about the role of the empathic process in education.

Included in the definitions of the empathic process as defined and

analyzed by researchers and theorists are many dimensions. What appears to be a first step to empathic behavior is the willingness to go beyond the self and to then relate to another person. Blackman, working with schizophrenic patients, has observed that they often will not allow another to know their feelings or concerns. Without this initial willingness on the part of the patient, no benefit can be gained from the counseling situation. What does this say to the teacher? Suggested is the teacher's willingness to allow a child to move into his being, so to speak, to feel his feelings as they honestly are. Without this initial willingness on the part of the teacher, it is reasonable to question whether that teacher will be at all able to understand how a child feels about what he is doing and what he is learning. This initial willingness on the part of the teacher to expose his feelings honestly then allows the child to do so also. This does not mean that the expression of those feelings can be inappropriately and indiscriminately expressed. By all means, required is sensitive control in expressing feelings. An honest expression such as "I am furious, John, that the plant was spilled in the fish tank, now let's clean it out," tells the child how the teacher honestly feels and at the same time gives him a knowledge of the emotional climate of his classroom at that specific time. Such a statement also provides John with a direction as to what one does when one is angry, mainly, try to correct what has been the source of anger. The consideration the teacher gives John in relation to his responsibility to make right a mistake teaches him that out of "failure" he can learn. In addition, the teacher's freedom to express feelings

honestly provides a model for John to learn how to express his own feelings honestly and in a way conducive to his becoming competent. Thus, this initial willingness to allow another person to know one's feelings is necessary for achieving a state of empathic understanding.

There are additional steps in the empathic process. Carl Rogers describes the empathic process in a systematic way. The most therapeutic relationship occurs when the counselor assumes:

> ". . . the internal frame of reference of the client, to perceive the world as the client himself as he is seen by himself, to lay aside all perceptions from the external frame of reference while doing so, and to communicate something of this empathic understanding to the client."

Rogers' description of the empathic process has four steps. He labels each by identifying the defining characteristics which clarify and assist the reader in understanding the necessary components of empathizing with another. Rogers deliberately clarifies what he means by empathy as he has observed that some inexperienced clinicians assume another attitude toward their clients which results in their responding to the client in a directive way rather than with empathic understanding. This subtle difference between responding with empathy as opposed to being direct is critical in determining whether the counselor facilitates the client's learning or, in fact, prevents it. This observation has tremendous implications for the responses teachers give children in a learning relationship. The important component Rogers identifies in the response emerging from an empathic attitude is an "as if" feeling that one is in another's pair of shoes. Rogers says that if this quality is not present in the counselor's response to his client, the client

will be unable to express his feelings, a critical variable on which his ability to learn about himself is based.

Rogers' description of the empathic process identifies processes within empathy with which every classroom teacher is familiar. Identification has been included in many definitions of empathy. Rogers suggests an identification process involved with perceiving the world as the client does. David Stewart and Henry Smith believe that imitation occurs in the identification process. While this is not definitely "sorted out" in terms of the relationship between identification and imitation, teachers benefit from the awareness that imitating and identifying occur in the empathic process.

Transference is also suggested in Rogers' description of the empathic process. Assuming the "internal frame of reference" of another helps to create the "bond of affection" that Freud called transference in the client-counselor relationship. Freud viewed transference as part of the identifying process between the counselor and client.

Basic to transference is good will. Good will is the "conscious form of that which unconsciously and spontaneously is the very ground of the transference process." Without good will, Stewart says "a wall comes up and mutual acquaintance is delayed."

What also appears to be involved in the empathic process is what educators and psychologists call role-playing. To assume the "internal frame of reference" of another person in some way suggests that one pretends to be the other person and to perceive the situation as that other person sees it and feels it, as the child who pretends to be mommy.

Through role-playing an understanding is internalized as to what it is like to be the other person. Role-playing appears to set the stage for assuming the "as if" quality involved in empathic understanding.

A distinction needs to be identified between assuming an empathic quality and projecting one's own feelings on another person. To respond to another person on the basis of what one thinks another person is feeling rather than on an understanding of what he is feeling will result in preventing him from being able to freely express himself. Suggested throughout Rogers' client-centered therapy literature is a technique to prevent this from occurring. Basically what is involved is for the teacher, for example, to repeat what the child says before responding to the content of his conversation and not one's judgments of what he is saying. This technique assists the teacher in the same way as role-playing assists the child to understand what it is like to feel another person's ideas and reactions. To do this allows the child the benefit of receiving from the teacher his understanding as well as the knowledge that his years of experience have allowed him to accumulate. Because the teacher assumes an empathic understanding of the child, he moves into the child's frame of reference and responds to that frame of reference as if it were his own ideas, feelings, and concerns. In a very practical setting, verbally repeating all of what a child says would be impossible. But what would be realistic and assist the teacher in accomplishing the same end would be a conscious repeating of the child's words and an overt repetition when there appears to be a lack of understanding in communication. Of importance is to let the

child know that in some way he is understood and that his ideas and concerns make a difference to the teacher. The teacher is always in the position of being a responder to the learner, to let him know whether he is organizing knowledge accurately. Frequently, the child provides the teacher with insight into new ways of organizing information which is of sound logical basis and different from the teacher's. In any event, to learn competently, the child and the teacher must participate in the process which involves accurate perceptions of the way each other is thinking, feeling, and acting, rather than an assumed guess about these qualities.

Another distinction needs to be made between empathy and another process, sympathy. Buchheimer defines this distinction in the following way:

> "A sympathetic person feels along with another person but not necessarily into a person. A sympathetic person does not need to interact with another person. To feel along with him, he may understand the other person, but does not need to communicate the understanding to the other person. Empathic behavior implies a convergence of behavior. Sympathetic behavior implies a parallelism in the behavior of the two individuals."

In addition to knowing how to empathize, one must know also how to arrive at an empathic state of being. Rollo May states:

> ". . . learning to relax, mentally and spiritually as well as physically, learning to let one's self go into the other person with a willingness to be changed in the process. It is the great giving up of one's self, losing one's personality temporarily and then finding it a hundred fold richer in the other person."

Katz suggests that it is through inspiration and perceiving beauty that man can arrive at an empathic state. He states:

> ". . . we experience empathy when we project more complex emotional states. We discover our inner feelings about inspiration and beauty in external objects of a cathedral, we describe the structure as being 'spiritual' and tend to believe that such qualities objectively belong to the structure itself. The specific combination of stone, line, and color becomes for us a tangible expression of beauty so that we apprehend the total structure as a Gestalt which is more meaningful to us. Without such empathy, we would respond to details, apprehending the edifice as an artistic whole."

Thus, it follows that to elicit an empathic response, one must arrive at a state of letting the self go, temporarily. Suggested within the writings of May and Katz is the necessity of the individual to learn how to experience beauty and be refreshed through inspiring thoughts.

Learning to focus beyond the self, then, assists one to relax and become willing to receive into his being an external world, whether it be a person or the external environmental setting.

How does one arrive at an empathic state?

1) A willingness to go beyond the self, to let go of one's feelings of self, temporarily.
2) A willingness to "take in," to allow another to feel at one with one's self.
3) Assuming the "internal frame of reference" of another (merging with the other; being attuned with the other; transferring one's self to the other).
4) Identifying the world as the other perceives the world with no judgment about his external frame of reference as if playing his role.

5) Responding to the other either with words, actions, or both relating to the other an understanding of his concern (responding with empathic understanding).

A differentiating between one's self and the other, between content and feeling takes place within each step of the empathic process. An integration of one's self with the other, of feelings connected to specific content occurs between each step in the empathic process.

If empathy is so critical a process in facilitating learning, then a teacher's preparation in learning how to arrive at an empathic state and sustaining and maintaining that empathic state is as critical to his or her teaching competence as a knowledge of the subject content.

COMBINED CONDITION INSTRUCTION

This instructional condition included the presentations made in the aesthetic-religious condition and in the didactic-content condition. The three to five minute music presentation was followed by the aesthetic-religious instruction first and the didactic-content condition followed immediately after.

CONTROL CONDITION--NO INSTRUCTION

The subjects in this condition received no instruction. The procedures followed in this condition were the same as the others with the exception of no instruction.

A P P E N D I X E

DATA SAMPLES

1) Aesthetic-Religious Condition

2) Didactic-Content Condition

3) Combined Condition

4) Control Condition

AESTHETIC-RELIGIOUS CONDITION

Data Response Form	Ratings of Judges		
	(J_1)	(J_2)	(J_3)
# 2	1	1	1
#15	4	2	2

CRITICAL INCIDENT FORM #2

You are a teacher in this situation. How would you respond?

"Your test is too obvious. Because of the lengthly [sic] recorded speeches, the lack of verbal communication regarding instruction etc. then obviously we are completely lost for a logical answer. The fact that we can't answer this ambiguous question demonstrates the lack of emphathy [sic] by you. I was on the verge of sleep because of bordom [sic]; because of a lack of emphathy [sic]. It was too obvious."

CRITICAL INCIDENT FORM #15

You are a teacher in this situation. How would you respond?

"I would approach the child who is apprehending the other and put the blanket back in the carriage where it belongs, explaining to the child that it is best there and would make the other child happy. Otherwise occupy the child with something else. The child obviously is too young to inwardly regret or realize what she is doing is morally wrong. If this is the only situation of aggrevation [sic] by this particular child viewed I am tempted to almost say overlook it."

DIDACTIC-CONTENT CONDITION

Data Response Form	Ratings of Judges		
	(J_1)	(J_2)	(J_3)
#16	6	6	5
# 3	3	3	3

CRITICAL INCIDENT #16

You are a teacher in this situation. How would you respond?

"Being a teacher, I would try to honestly forget how I felt about the children's quarrel and put myself in their place, and try to experience how each child was feeling, and derive my response to the situation from there. In attaining an approximate way to react to the incident, I would try to keep in mind that the any [sic] incident such as the spat over the baby carraige [sic] is a potential learning experience, and would try to intervene in the situation, thusly, in a way that would be constructive to the children and change them, and therefore effect how they would react in future similar situations."

CRITICAL INCIDENT FORM #3

You are a teacher in this situation. How would you respond?

"Probably what I would do in this situation would naturally be to go up to the girl who grabbed away the play things, bring her over to the other child, and very casually say something like 'what's the problem here?' Actually I'm not a teacher and I don't have the slightest idea how to handle kids in a proper manner; I just would be myself and join in like another kid and work things out between the 3 of us. What else can one do?"

COMBINED CONDITION

Data Response Form	Ratings of Judges		
	(J_1)	(J_2)	(J_3)
# 7	2	2	2
#17	4	5	3

CRITICAL INCIDENT FORM #7

You are a teacher in this situation. How would you respond?

"I would break the children apart but essentially ignore the aggression--rewarding praise and attention to them when they are behaving themselves, thereby reinforcing good conduct according to behavior therapy principles."

CRITICAL INCIDENT FORM #17

You are a teacher in this situation. How would you respond?

"I would try to resolve the conflict by talking to each child respectively. Listen to both sides of the argument and try to do the right thing. Explaining to each of them that friendship constitutes playing together happily."

CONTROL CONDITION

Data Response Form	Ratings of Judges		
	(J_1)	(J_2)	(J_3)
#22	5	3	3
#32	2	1	2

CRITICAL INCIDENT FORM #22

You are a teacher in this situation. How would you respond?

"I would go up to the little boy and talk about sharing the blanket to keep the little baby dolls warm on their walk in the stroller. Perhaps giving him a roll [sic] in the doll play as a father so he can feel that he is also contributing--without making him feel that the blanket is being taken away from him to give it to the little girl. Hopefully neither will feel abandoned or slighted."

CRITICAL INCIDENT FORM #32

You are a teacher in this situation. How would you respond?

"Tell the children they should share the toys. Give one of them the job of walking the carriage, while the other one could carry the doll's blanket or cover the doll with it. Give them turns at walking the carriage, and covering the doll with the blanket."